

FIG. 1

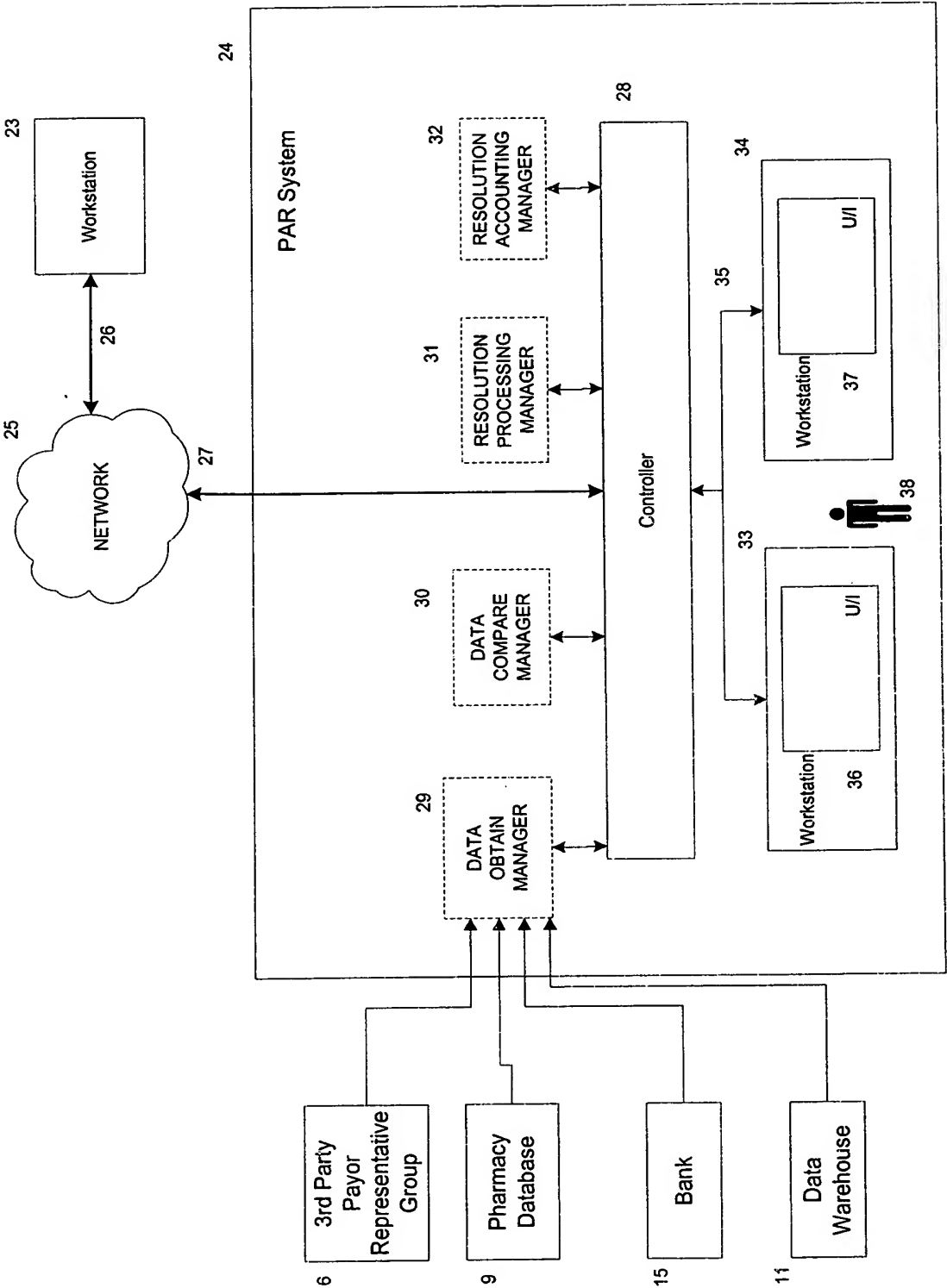


FIG. 2

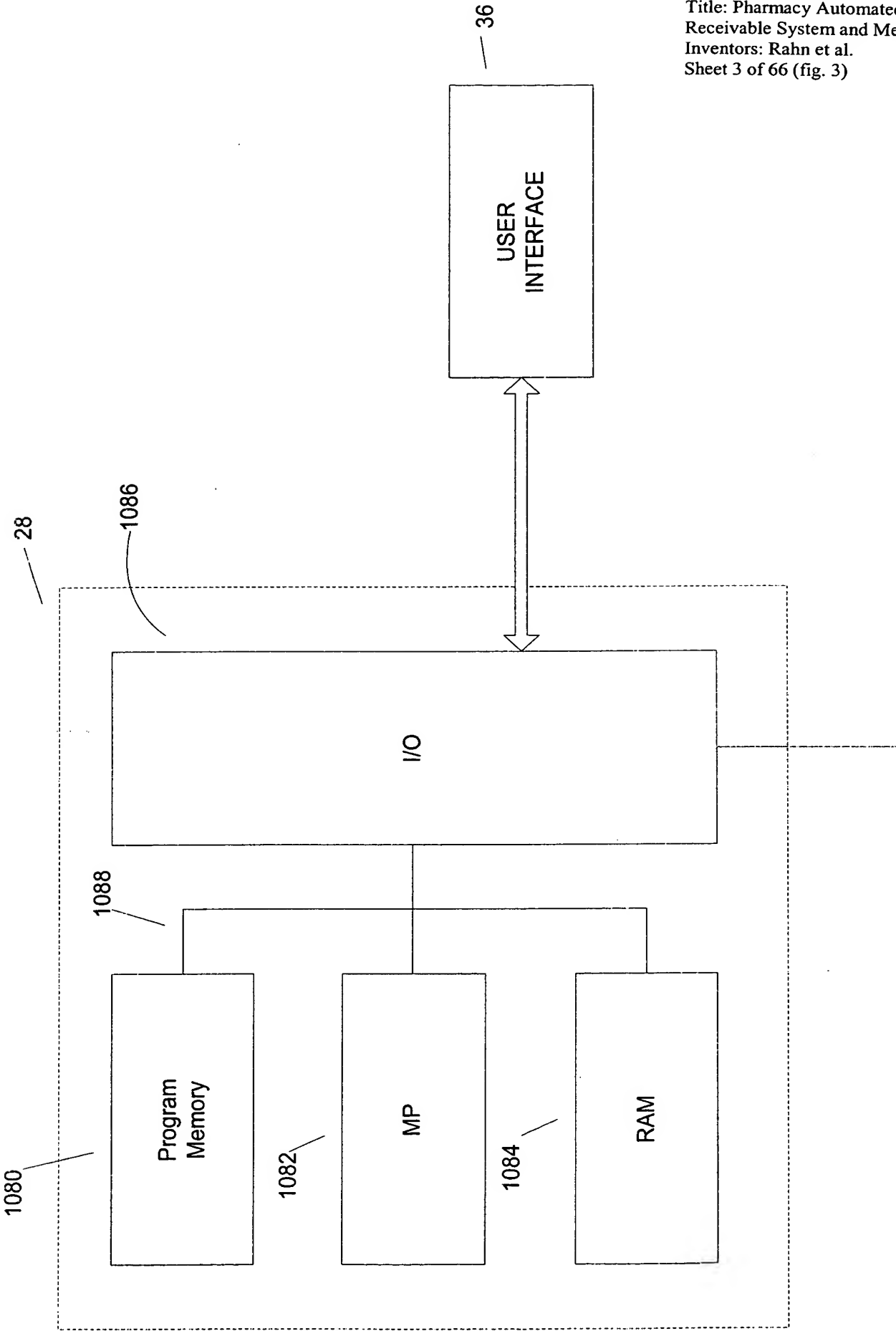
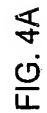


FIG. 3



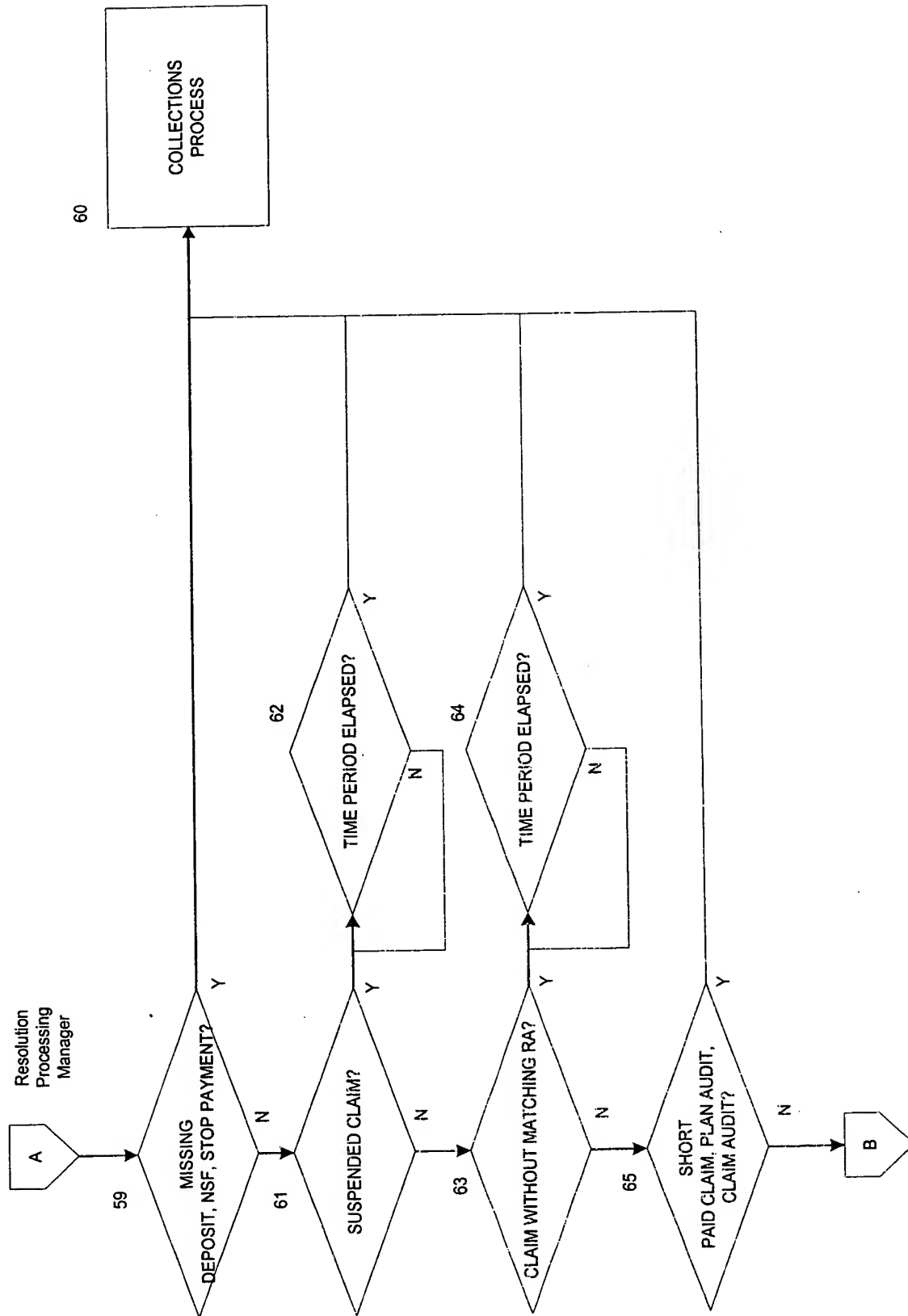


FIG. 4B

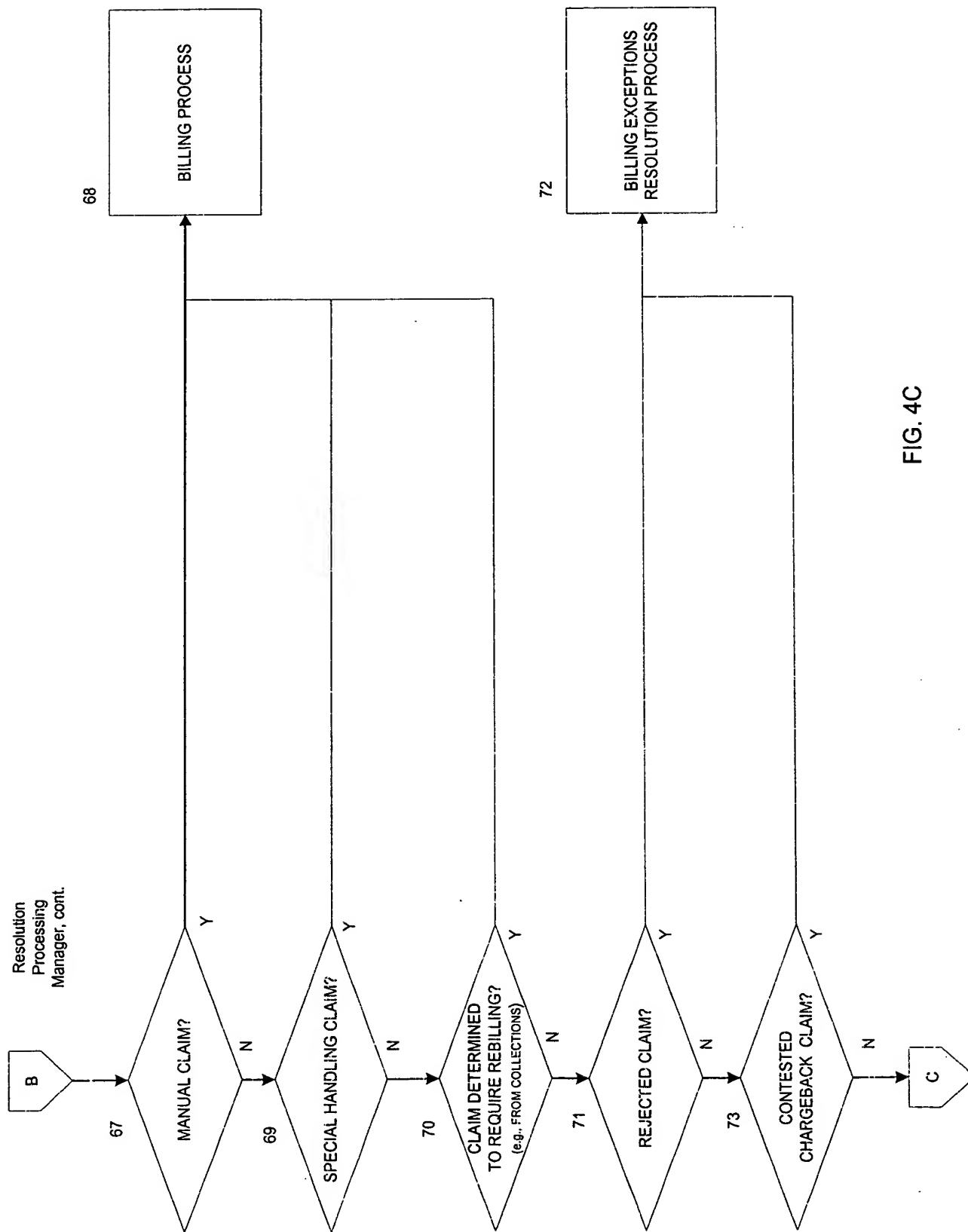


FIG. 4C

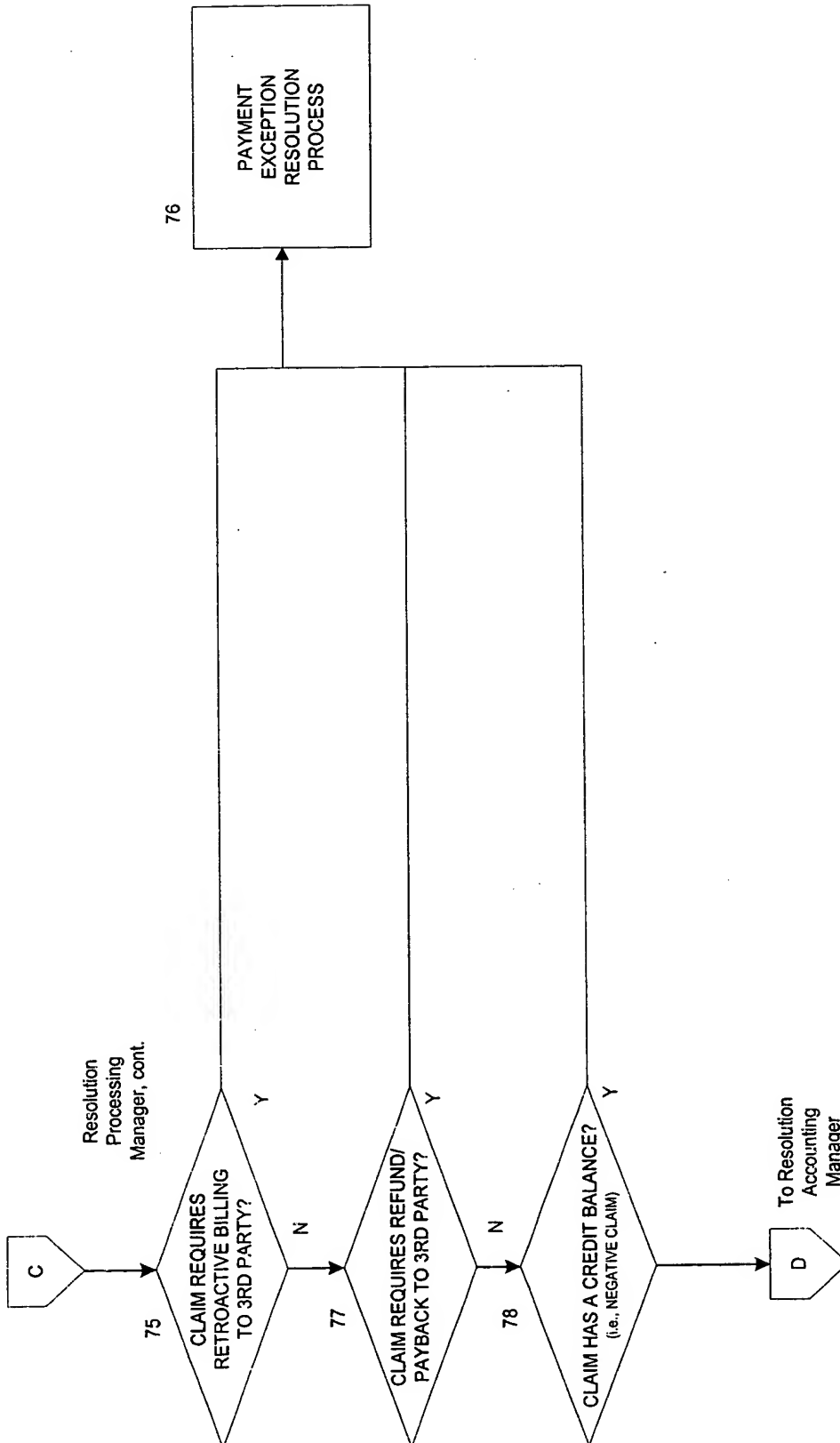


FIG. 4D

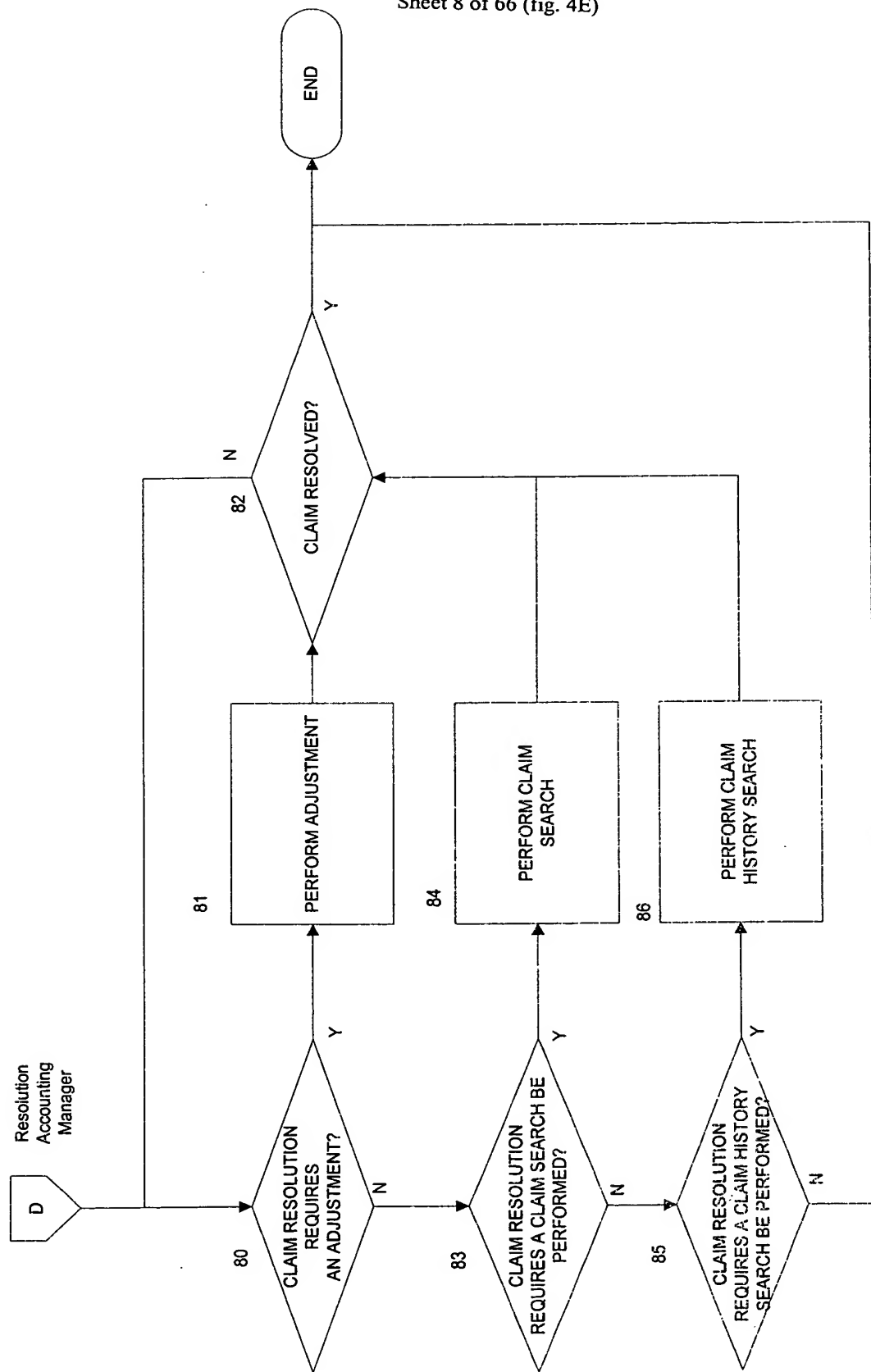


FIG. 4E

BICARE SUMMARY PAYMENT VOUCHER



ABC Insurance Co. ← 101
Federal Services

Palmato Government Benefits
Claims Administrator California
P.O. Box 870001
San Jose, CA 95131-0001



BICARE

||||| WALGREENS 890
P.O. BOX 70104
CHICAGO IL 60673-0104

Provider Number	Check Number	Date of Voucher
361924025112	0060229444	01/18/02

SERVICE CODES		
PLACE OF TREATMENT	TYPE OF SERVICE	
1-IMPATIENT HOSPITAL	1-BLOOD	F-AMBULANCE
2-OUTPATIENT HOSPITAL	2-SURGERY	G-EQUIPMENT PURCHASE
3-PHYSICIAN'S OFFICE	3-MATERNITY	H-EQUIPMENT RENTAL
4-PATIENT'S HOME	4-ANESTHESIA	K-
5-DAY CARE FACILITY	5-X-RAY	L-HOUSING
6-NIGHT CARE FACILITY	6-MEDICAL CARE	P-PROFESSIONAL
7-NURSING HOME	COMPONENT 7-DENTAL	S-HOSPITAL CHARGES
8-BILLED NURSING FACILITY	8-LAB PATHOLOGY	T-
9-AMBULANCE	9-CONSULTATION	U-
0-OTHER	0-ASSISTANT SURGERY	V-
A-INDEPENDENT LABORATORY	A-MEDICAL EMERGENCY	W-
B-RESIDENTIAL TREATMENT CENTER	B-CONCURRENT CARE	X-
C-SPECIALIZED TREATMENT FACILITY	C-PSYCHIATRIC	
D-CONT HEALTH AGENCY	D-PHYSICAL THERAPY	
E-PHARMACY	E-THERAPEUTIC X-RAY	

To appeal our decision, you must WRITE us within ninety (90) days of the date of this notice

Patient Account Number	Patient's Name Sponsor's Social Security Number	Admission or From Date	Discharge or Thru Date	No. of Service	Service Codes		Total Charges	Reason Codes	Allowed Covered Charges	Deductible	Procedure Code CPT-6	Payment
					Type	Place					Cost Share/Copay	
793	Patient #1 555010502	010802	010802	001	K	P	30.19 30.19		30.19 30.19	.00 .00	9.00	21.00 21.00
794	Patient #2 55501052	01082	010802	001	K	P	10.10 10.10		10.10 10.10	.00 .00	3.00	7.10 7.10
40.29	.00	.00	40.29	.00	.00		12.00		28.29	.00		28.20
Charges	Total Other Carrier	Total Non-Covered Charges	Total Allowed Covered Charges	Total Previous Paid	Total Deductible	Total Cost Share/Copay	Total TRICARE Payment		Interest Payment			Check Amount

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FIG. 5

Source to Table Mapping

121	122	123	124	125
Table Name	Column Name	Data Type	Source	Source Field Name
Claim HDR	Patient Name	Varchar2	K600	pat First Name+pat Middle Initial+pat Last Name
Claim HDR	Address	Varchar2	K600	pat street address, pat city, pat state, pat zip
Claim HDR	Phone #	Varchar2	K600	pat prim_Area_cd+pat_prim_phone_Nbr
Claim HDR	Date of Birth	Varchar2	K600	pat birth_dttm
Claim HDR	Sex	Varchar2	K600	pat sex_cd

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 Sheet 10 of 66 (fig. 6)

Screen to Table Mapping

131	132	133	134	135
Use Case	Screen Name	Screen Component	Table	PARS Field Name
IPCS	Claim Transaction Detail	Patient Name	Claim Hdr	pat First Name+pat Middle Initial+pat Last Name
IPCS	Claim Transaction Detail	Address	Claim Hdr	pat street address, pat city, pat state, pat zip
IPCS	Claim Transaction Detail	Phone #	Claim Hdr	pat_prim_Area_cd+pat_prim_phone_Nbr
IPCS	Claim Transaction Detail	Date Of Birth	Claim Hdr	pat_birth_dttm
IPCS	Claim Transaction Detail	Sex	Claim Hdr	pat_sex_cd

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Sheet 11 of 66 (fig. 7)

FIG. 7

Manually Add Other Deposits

Current Entry: Line 1 (To edit an entry, click its Line number in the Current Batch Entries listed below.)

Deposit Date	Deposit Amount	Routing Number	Account Number	Deposit ID	Check Date	Remitter ID

Deposit Save Reset Deposit

Deposit Summary (Running Totals)

Deposit Batch Total: \$0.00

Count

0

Running Total of Deposits Entered: - \$0.00

0

Remaining to be Reconciled: = \$0.00

0

Batch Reset

Submit Batch

Current Batch Entries (This session only)

Line #	Deposit Date	Deposit Amount	Routing Number	Account Number	Deposit ID	Check Date	Remitter ID

FIG. 8A

PARS Home - Microsoft Internet Explorer

File Edit View Favorites Tools Help

Address http://devpers1.walgreens.com:81/pers3test1/servlet/walgreens.pers.arch.PARSProxy/

Home Billing Exceptions Deposits Investigate Claim Payment Exceptions RA Entry Report Queries Logout
Billing Collections Deposits to RA Maintenance Plans / Processors RA to Claims Supervisor PARS Help

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Manually Add Other Deposits Search For Deposits

Current Date: 06/26/2003

Search for Deposits

Sort By

Date: To

Remitter ID:

Remitter Name:

Deposit Amount: To

Deposit ID:

Check Date: To

Location Number: 1382 WELLS FARGO APOLLO
70104 BANK ONE THIRD PARTY

Routing Number:

Account Number:

Batch Number:

Sequence Number:

Deposit Type: ALL

Deposit Status: ALL

Show RA Location: ☐ All ☐ Not Assigned

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Cancel Reset Search

Done Start Nancy Rahn - Drafts - Lot... PARS Home - Microsoft 5:51 PM

FIG. 8B

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PARS Home - Microsoft Internet Explorer

File Edit View Favorites Tools Help

Address http://devpars1.walgreens.com:81/pars/rest1/server/walgreens.pars.arch.PARSProxy/

Home Billing Exceptions Deposits Investigate Claims Payment Exceptions RA Lobby Report Queries Logout
Billing Collections Deposits to RA Maintenance Plans / Processors RA to Claims Supervisor PARS Help

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Manually Add Other Deposits Search For Deposits

Search for Deposit Results

Current Date: 06/26/2003

Deposit Search Total: \$2,930,998.47

Deposit Date	Amount	Status	ID	Remitter Name	Deposit Type	Location Number	Bank Name/Description	Deposit ID	Remittance Number	Account Number	Batch Number	Sequence Number	Cash Date
05/09/2003	\$1,943.36	MATCHED TO RA	102	MEDIMPACT	CHK	70104	BANK ONE - THIRD PARTY	2234498	052200019	540434586	710	9	
05/09/2003	\$2,847,220.42	MATCHED TO RA	13	ARGUS HEALTH SYSTEMS	CHK	70104	BANK ONE - THIRD PARTY	124324	101218704	430000267	728	3	
05/09/2003	\$4,201.44	MATCHED TO RA	41	CONSULTEC INC	CHK	70104	BANK ONE - THIRD PARTY	767968	111909634	4759504285	729	2	
05/09/2003	\$2,344.60	MATCHED TO RA	41	CONSULTEC INC	CHK	70104	BANK ONE - THIRD PARTY	768711	111909634	4759504285	729	3	
05/09/2003	\$2,115.81	MATCHED TO RA	41	CONSULTEC INC	CHK	70104	BANK ONE - THIRD PARTY	767873	111909634	4759504285	729	5	
05/09/2003	\$31,157.28	MATCHED TO RA	41	CONSULTEC INC	CHK	70104	BANK ONE - THIRD PARTY	764895	111909634	4759504285	729	6	
05/09/2003	\$9,827.13	MATCHED TO RA	41	CONSULTEC INC	CHK	70104	BANK ONE - THIRD PARTY	761621	111909634	4759504285	729	7	
05/09/2003	\$4,267.28	MATCHED TO RA	41	CONSULTEC INC	CHK	70104	BANK ONE - THIRD PARTY	768296	111909634	4759504285	729	8	
05/09/2003	\$20,596.61	MATCHED TO RA	41	CONSULTEC INC	CHK	70104	BANK ONE - THIRD PARTY	761620	111909634	4759504285	729	9	
05/09/2003	\$10,209.51	MATCHED TO RA	41	CONSULTEC INC	CHK	70104	BANK ONE - THIRD PARTY	772320	111909634	4759504285	727	1	
05/09/2003	\$1,012.23	MATCHED TO RA	41	CONSULTEC INC	CHK	70104	BANK ONE - THIRD PARTY	768003	111909634	4759504285	729	1	

Cancel Narrow Search

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Start Nancy Rahn - Drafts - Lot... PARS Home - Microsoft Microsoft Word - Document... 5:56 PM

FIG. 8C

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PARS Home - Microsoft Internet Explorer

File Edit View Favorites Tools Help

Address http://devpars1.walgreens.com:81/pars3test1/service/walgreens.pars.arch.PARSPROXY/

Home Billing Exceptions Deposits Investigate Claim Payment Exceptions RA Entry Report Queries Logout
Billing Collections Deposits to RA Maintenance Plans / Processors RA to Claims Supervisor PARS Help

1600

Search Add Plan Add Processor Search for R/AAA View Terminated Plans

Current Date: 06/26/2003

Search for Plan or Processor

Plan ID: (*) Sort By

Plan Name: (*)

Adjudicator Name or ID: (*)

RA Provider Name or ID: (*)

Remitter Name or ID: (*)

Screen Positioning

☒ Plan Info ☐ Processor Info

☐ Billing Info ☐ Billing Exceptions

☐ Payer Info ☐ Payment Exceptions

☐ RA Provider Reject Codes

Cancel Reset Search

Start Internet Nancy Rahn - Drafts - Lot... PARS Home - Microsof... Microsoft Word - Docume... 5:59 PM

FIG. 9A

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FAPARS Version 2.0 Design Screens \Plan\PlanSearchResult B.html - Microsoft Internet Explorer

Search Add Plan Add Processor Mainline R/BAA Validate Changes View Terminated Plans

Search for Plan or Processor Results Current Date: 08/13/2001

Sort view by clicking header or sort multiple columns by clicking [here](#)

Query returned 286 results. (only first 100 are displayed)

Plan ID	Plan Name	Adjudicator Name	Primary Regular Series Billing Form	RA Provider Name	Remitter Name
AACC	PLAN NOT ACTIVE - AMERICAN ART CLAY CO - WALGREENS PLAN A	Plan Adjudicates for Self	PO - PARAMETERS ONLY	Plan Provides RA for Self	Plan Remits for Self
AAFH	ALAMEDA ALLIANCE FOR HEALTH	PHARMACEUTICAL CARE NETWORK	FA - FULL ADJUDICATION	PHARMACEUTICAL CARE NETWORK	PHARMACEUTICAL CARE NETWORK
AAH	ATALAYA HEALTH PLAN	MEDIMPACT	FA - FULL ADJUDICATION	MEDIMPACT	MEDIMPACT
AAHS	A AVENUE HEALTH SERVICES	Plan Adjudicates for Self	LR - LINE REPORT	Plan Provides RA for Self	Plan Remits for Self
AATR	PLAN NOT ACTIVE - ALL AMERICAN TRANSPORT - WALGREEN PLAN C	MEDIMPACT	PO - PARAMETERS ONLY	MEDIMPACT	MEDIMPACT
ABBB	PLAN NOT ACTIVE - PLAN ABBB	Plan Adjudicates for Self	UC - UNIVERSAL CLAIM FORM	Plan Provides RA for Self	Plan Remits for Self
ARCPR	PLAN NOT ACTIVE - ALLIANCE BLUE CROSS BLUE SHIELD - PERK	MEDIMPACT	FA - FULL ADJUDICATION	MEDIMPACT	Plan Remits for Self
ARCE	PLAN NOT ACTIVE - ANETSBERGER BROTHERS INC - WALGREENS PLAN B	PHARMACEUTICAL CARE NETWORK	PO - PARAMETERS ONLY	PHARMACEUTICAL CARE NETWORK	PHARMACEUTICAL CARE NETWORK

166 167 168 169 170

FIG. 9B

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Edit Plan Info - Microsoft Internet Explorer

File View Favorites Tools Help

Forward Stop Home Search Favorites Home

D:\NVP User Review\planNE dPlan.html

Search Add Plan Add Processor Maintain R/BAA Validate Changes View Terminated Plans

Current Date: 06/09/2001

Edit Plan

Plan Info Billing Info Payer Info Adjudicator RA Provider Remitter Billing Exception Payment Exception

Plan ID: AETNA Start Date: 06/27/1994

Plan Name: AETNA/CHOICE PLUS/AETNA U.S. Termination Date:

Plan Category: NON-RELIEF

IC+ Status: ACTIVE Effective Date: 06/27/1994

Team: Chicago Cubs CRW Plan: ☐

Walgreens Sales Contact: Kerry Wood Cash & Carry: ☐

Processor Type	Self	Same As Adjudicator	Third-Party	Effective Date
Adjudicator	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/> AETNA US HEALTHCARE	06/27/1994
RA Provider	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/> AETNA US HEALTHCARE	06/27/1994
Remitter	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/> AETNA US HEALTHCARE	06/27/1994

Back Edit Save

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FIG. 9C

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View Plan Billing Info - Microsoft Internet Explorer

Address: F:\PARS-Version2\Design\Screen\plan\viewBillingInfo.html

Search Add Plan Add Processor Maintain R/EAA Validate Changes View Terminated Plans

Current Date: 08/07/2001

View Plan - Billing Info

Plan Info Billing Info Payer Info Adjudicator RA Provider Remitter Billing Exception Payment Exception

Plan ID: AETNA
 Plan Name: AETNA/CHOICE PLUS/AETNA U.S. HEALTHCARE/ GOLDEN MEDICARE
 Adjudicator: AETNA US HEALTHCARE
 RA Provider: AETNA US HEALTHCARE
 Remitter: AETNA US HEALTHCARE

Start Date: 06/27/1994
 Termination Date:
 Effective Date: 06/27/1994
 Effective Date: 06/27/1994
 Effective Date: 06/27/1994

Expand All | Collapse All

Primary Billing Method	Effective Date: 07/30/2001	Regular Supply	Regular Long-term
Regular Script			
Method: Online Form: Full Adjudication			
Special Handling:	No	No	
Attachment: No			
Special Handling Comment:			
Original Submission Windows (days): 10	0	0	
Reject Resubmission Windows (days): 10	0	0	
A/R Offline Method:			
Alternative Script			
Method: Paper Form: Universal Claim Form			
Special Handling:	No	No	
Attachment: No			
Special Handling Comment:			
Original Submission Windows (days): 10	0	0	
Reject Resubmission Windows (days): 10	0	0	

Exit Plan Billing Method

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FIG. 9D

Part I

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2 Edit Payer Info - Microsoft Internet Explorer

Address: F:\PARS-Version2\Design\Screens\planViewPayerInfo.htm

Search Add Plan Add Processor Maintain R/EAA Validate Changes View Terminated Plans

Current Date: 06/07/2001

View Plan - Payer Info

Plan Info Billing Info Payer Info Adjudicator RA Provider Remitter Billing Exception Payment Exception

Plan ID: AETNA Start Date: 06/27/1994
Plan Name: AETNA/CHOICE PLUS/AETNA U.S. HEALTHCARE/ GOLDEN MEDICARE Termination Date:
Adjudicator: AETNA US HEALTHCARE Effective Date: 06/27/1994
RA Provider: AETNA US HEALTHCARE Effective Date: 06/27/1994
Remitter: AETNA US HEALTHCARE Effective Date: 06/27/1994

Expand All | Collapse All

Primary Billing Method Effective Date: 07/30/2001

	Regular Script	Regular Supply	Regular Compound
Method: Online			
Form: Full Adjudication			
Original Submission Windows (days): 0	0	0	0
A/R Offline Method:			
Method: Paper			
Form: Universal Claim Form			
Original Submission Windows (days): 0	0	0	0

COB Method Effective Date: 07/30/2001

	Regular Script	Regular Supply	Regular Compound
Method: Online			
Form: Full Adjudication			
Original Submission Windows (days): 0	0	0	0

Part II

2 Edit Payer Info - Microsoft Internet Explorer

Address: D:\OP User Review\planViewPayerInfo.htm

COB Method Effective Date: 07/30/2001

	Regular Script	Regular Supply	Regular Compound
Method: Online			
Form: Full Adjudication			
Original Submission Windows (days): 0	0	0	0
Method: Paper			
Form: Universal Claim Form			
Original Submission Windows (days): 0	0	0	0

Payer Cycle Effective Date: 07/30/2001

Cycle Frequency: Weekly
Cycle End Date: 02/01/1999
Payment Terms (days): 30
Initial Calculation Date: 1/1/99

Payer Financial Information Effective Date: 07/30/2001

Expected RA Type: Electronic Sub-Batch Identifier: Deposit ID
Expected Deposit Type: Lockbox Check RA Truncating Format: nnnnnnn

Payer Contact Information Effective Date: 07/30/2001

Description:
Name:
Title:

FIG 9E.

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Maintain Remitter/Bank Account Association - Microsoft Internet Explorer

Forward Stop Redirect Home Search Favorites History

F:\PARS-Version2\Design\Screen\plan\MaintainRBAA.html

Search Add Plan Add Processor Maintain R/BAA Validate Change View Terminated Plans

Current Dates 09/12/2001

Maintain Remitter/Bank Account Association

Specify Remitter

Find:

Remitter ID:

Associate Routing and Account Numbers

Current Routing-Account Numbers and RA Providers

123456789-1234567812345678	Blue Cross Blue Shield
123456789-1234567812345679	Blue Cross Blue Shield
123456789-1234567812345670	Blue Cross Blue Shield
123456789-1234567812345671	Blue Cross Blue Shield
123456789-1234567812345672	Blue Cross Blue Shield

Routing # Account # RA Provider

FIG 9F.

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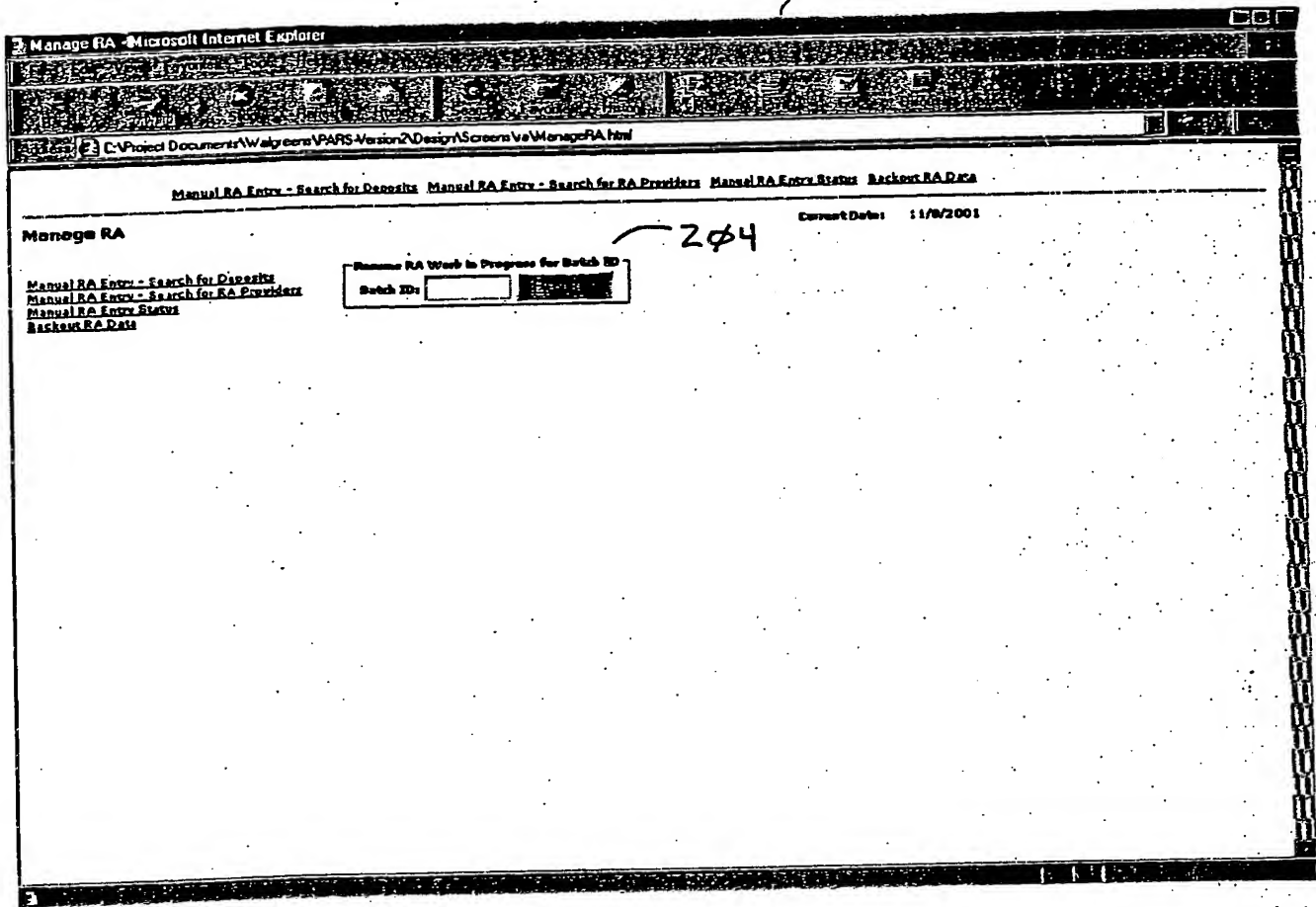


FIG. 10A

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Batch RA Entry - Find Deposits - Microsoft Internet Explorer

C:\Project Documents\Web\www.VPARS-Version2\Design\Screen\ManualRABatchEntry_DepositSearch.html

Manual RA Entry - Search for Deposits Manual RA Entry - Search for RA Providers Manual RA Entry Status Backout RA Data

Manual RA Entry - Search for Deposits Current Date: 11/8/2001

Remittance:

Deposit ID: Check Date:

Deposit Amount: Deposit Date:

[Manual RA Entry](#) [Exceptions Entry](#)

FIG. 10B

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Batch RA Entry and Deposits - Microsoft Internet Explorer

C:\Project Documents\Walyeers\PARS\Version2\Design\Screen\Va\ManualRABatchEntry_DepositSearch_R.htm

Manual RA Entry - Search for Deposits Manual RA Entry - Search for RA Providers Manual RA Entry Summary Batched RA Data

Manual RA Entry - Search for Deposits Results Current Date: 11/8/2001
 Sort view by clicking header or sort multiple columns by clicking [link](#)

Query returned 4 results

Deposit Date	Amount	Status	Remitter	Deposit Type	Deposit ID	Remittance Number	Account Number	Batch Number	Remittance Number	Check Date
06/03/2001	\$2000.00	UNMATCHED	Remitter1	MCK	123564	2435435435	2435435435	43671234	123	06/06/2001
06/03/2001	\$2000.00	UNMATCHED	Remitter1	MCK	123564	2435435435	2435435435			
06/03/2001	\$2000.00	UNMATCHED	Remitter1	MCK	123564	2435435435	2435435435	43671234	123	06/06/2001
06/03/2001	\$2000.00	UNMATCHED	Remitter1	MCK	123564	2435435435	2435435435			

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Batch RA Entry and Deposits - Microsoft Internet Explorer

C:\Project Documents\Walyeers\PARS\Version2\Design\Screen\Va\ManualRABatchEntry_DepositSearch_R.htm

Manual RA Entry - Search for Deposits Manual RA Entry - Search for RA Providers Manual RA Entry Summary Batched RA Data

Manual RA Entry - Search for Deposits Results Current Date: 11/8/2001
 Sort view by clicking header or sort multiple columns by clicking [link](#)

Query returned 4 results

Deposit Date	Amount	Status	Remitter	Deposit Type	Deposit ID	Remittance Number	Account Number	Batch Number	Remittance Number	Check Date
06/03/2001	\$2000.00	UNMATCHED	Remitter1	MCK	123564	2435435435	2435435435	43671234	123	06/06/2001
06/03/2001	\$2000.00	UNMATCHED	Remitter1	MCK	123564	2435435435	2435435435			
06/03/2001	\$2000.00	UNMATCHED	Remitter1	MCK	123564	2435435435	2435435435	43671234	123	06/06/2001
06/03/2001	\$2000.00	UNMATCHED	Remitter1	MCK	123564	2435435435	2435435435			

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Batch RA Entry and Deposits - Microsoft Internet Explorer

C:\Project Documents\Walyeers\PARS\Version2\Design\Screen\Va\ManualRABatchEntry_DepositSearch_R.htm

Manual RA Entry - Search for Deposits Manual RA Entry - Search for RA Providers Manual RA Entry Summary Batched RA Data

Manual RA Entry - Search for Deposits Results Current Date: 11/8/2001
 Sort view by clicking header or sort multiple columns by clicking [link](#)

Query returned 4 results

Deposit Date	Amount	Status	Remitter	Deposit Type	Deposit ID	Remittance Number	Account Number	Batch Number	Remittance Number	Check Date
06/03/2001	\$2000.00	UNMATCHED	Remitter1	MCK	123564	2435435435	2435435435	43671234	123	06/06/2001
06/03/2001	\$2000.00	UNMATCHED	Remitter1	MCK	123564	2435435435	2435435435			
06/03/2001	\$2000.00	UNMATCHED	Remitter1	MCK	123564	2435435435	2435435435	43671234	123	06/06/2001
06/03/2001	\$2000.00	UNMATCHED	Remitter1	MCK	123564	2435435435	2435435435			

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FIG. 10C

THE UNIVERSITY OF CHICAGO

XXXXXXXXXXXXXXXXXXXX

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Batch RA Entry - Microsoft Internet Explorer

C:\Project Documents\Wayside\VPARS-Version2\Design\Screen\Manual\BatchEntry FOR RA PROVIDER.rhtm

Payment										
Payment										
Payment										
Payment										
Payment										
Payment										

Batch Summary (Running Totals)	Amount	Count
RA Batch Amounts	\$23,456,789.00	50
Running Total of RA Line Items Entered	\$10,000,000.00	20
Remaining to be Processed	\$13,456,789.00	30

Out of Balance

Out of Balance Approval

positive amount = credit to A/R, negative amount = debit to A/R

Current Batch Entries

Line Number	Extremity	Store Number	EO Number	EOE	Amount	Extension Code	Description Reason	Invoice Number	Relevant ID	Transaction Control Number	Sub-Batch Amount
123343	Adjustment	12345	1234567	12/12/2000	\$123,456,789,111.00	1234	Test entry here with reason 123456789	123456789012345	12345678901234567890	1234567890123	1234567890123
123346	Payment	12345	1234567	12/12/2000	\$111.00	1234	Test entry here with reason 123456789	1234567890	12345678901234567890	1234567890123	1234567890123
123347	Reject	12345	1234567	12/12/2000	\$111.00	1234	Test entry here with reason 123456789	1234567890	12345678901234567890	1234567890123	1234567890123

FIG. 10E

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PARS Home - Microsoft Internet Explorer

Address: http://devpars1.walgreens.com/webapp/ParsTest/forlet/walgreens.pars.erd/PARSProxy/walgreens.pars.requesthandler/PARSMainPageRequestHandler

Walgreens Pharmacy Accounts Receivables System

Go to this link here to expand or contract the Menu

Claim Information Current Date: 06/24/2002

Claim Balance: (\$0.12) Status: WAITING RA Status: REVERSED

Payment History				
Deposit Date	Deposit ID	RA Category	Encumbrance Reason	RA Amount

No #: 602104 DOB: 03/13/2002 Patient: MARTIN, Name: EMERY
Store #: 4123 GP #: 1816721 Receipt ID: 403999044
Plan #: Plan ID: HUNNY Receipt: ADVANCED Name: PCS

Claim Transaction Detail

Expand All | Collapse All

- ☐ Patient Information
- ☐ Workers Compensation
- ☐ RX Information
- ☐ Billing Information
- ☐ Provider/Prescriber Information
- ☐ Other Insurance
- ☐ Third Party
- ☐ Compound Drug Worksheet

Comments:

Start | Query Entry | Add | PARS Home - Microsoft | Data | Settings | **PARS Home** | Home

FIG. 10F

Claim Detail

Claim Information

Current Date: 06/03/2002

Claim Balance: \$5.65 State: WAITING RA Status: ACCEPTED

Next Claim

Rx #: 124143 Store #: 6076 DOS: 03/25/2002
General Pharmacy 761833 Invoice #: Plan ID: SCMED
#:
Remitter: SOUTH CAROLINA
Name: MEDICAID Recipient ID: 0102696101 Patient: PATRICK,
Name: ALAN

Payment History				
Deposit Date	Deposit ID	RA Category	Exception Reason	RA Amount

Claim Transaction Detail

Patient Information

Patient Name: ALAN PATRICK Nursing Home: N
Address: 7646 PINEHURST ST Consultation:
NORTH CHARLESTON, SC, 29420
Phone #: (843) 225-5407 Person Code:
Group #: Head of Household (HOH): ALAN PATRICK
Recipient #: 0102696101 Relationship to HOH: SELF
Date of Birth: 05/14/1991 Marital Status:
Sex: MALE Employment Status:

Workers Compensation

Recipient #: File #:
Claim #: Code:
Original Injury: Policy #:
Billing Injury: Group:
Carrier Name: Phone #:
Address:
Employer Name: Phone #:
Address:

RX Information

	Original	Billing
Drug Description:	CLONIDINE 0.1MG TABLETS	
Drug Code:	00378015210	
Quantity:	45.00	
Day Supply:	30	0

Plan Claim Reference #: 00000000000

Fill # Dispensed: 2 Diagnosis Code:
Fill #: 2 Date RX Written: 01/31/2002
Partial Fill Code: DAW Pay Code:
Associated Fill Date: New or Refill Rx: R
Associated Rx Number: 0 Allowed Refill Indicator: N
Days Supply Intended: 0 Unit Dose: 0

Billing Information

Address Description:
Billing Address:

	Submitted Basis Code	Submitted	Returned Basis Code	Returned
--	----------------------	-----------	---------------------	----------

(+)Cost:		\$9.79	00	\$1.60
(+)Dispensing Fee:		\$3.00		\$4.05
(+)Flat Tax:				
(+)Percent Tax:				
(+)Other Service Amount:				
(+)Incentive Amount:		\$0.00	00	\$0.00
(-)CoPay:		\$0.00		\$0.00
(-)Other Payor Amount:		\$0.00		
(=)Total:		\$12.79		\$0.00
Patient Attributed Tax(memo):				
% Sales Tax Basis(memo):				
% Sales Tax Rate(memo):	0.00%		0.00%	
% Plan Tax Exempt:				

Billing Remarks:**Provider/Prescriber Information**

Prescriber ID: AL2148028 **Store Provider #:** 761833
Prescriber Assigned #: 01233820 **Store Tax ID:** 361924025
Prescriber Name: FRANKLIN LEE **Pharmacist License #:**
Prescriber Type:

Other Insurance - 246

COB:	Other Coverage Type:
Other Source Code:	Other Coverage Code:
Policy #: 0102696101	Other Payor Date:
Insurance Name:	Other Payor Reject Code:
Other Insurance Carrier Code:	Medicare Status Code: 0
Third Party Liability Code:	Resource Code:

Third Party - 248

PA Code:	Category Service: R
PA #:	Origin Code:
RX Denial Override:	Visit Code: 0
Eligibility Override:	
DUR Conflict: (1)	(2) (3)
DUR Effort Level: (1) 00	(2) 00 (3) 00
DUR Intervention: (1)	(2) (3)
DUR Outcome: (1)	(2) (3)

Compound Drug Worksheet

Compound Drug Name:					
Ingredient	Cost/Unit	Quantity	Cost	NDC	Compound RX #
Total Quantity:					
NDC:					

Docket No.: 29488/38226A
Title: Pharmacy Automated Accounts
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Inventors: Rahn et al.
Sheet 28 of 66 (fig. 10H)

FLG 10 H

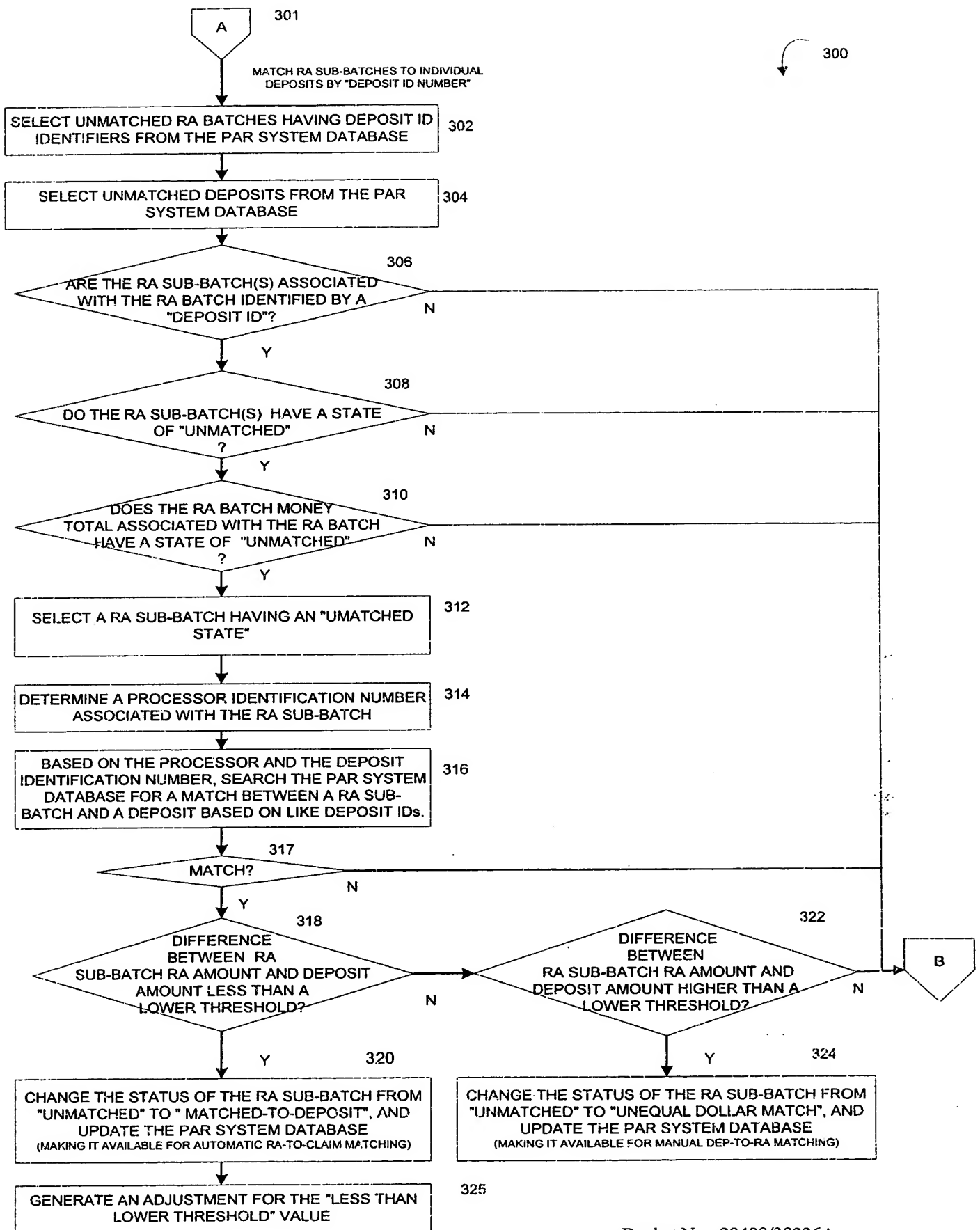


FIG. 11A

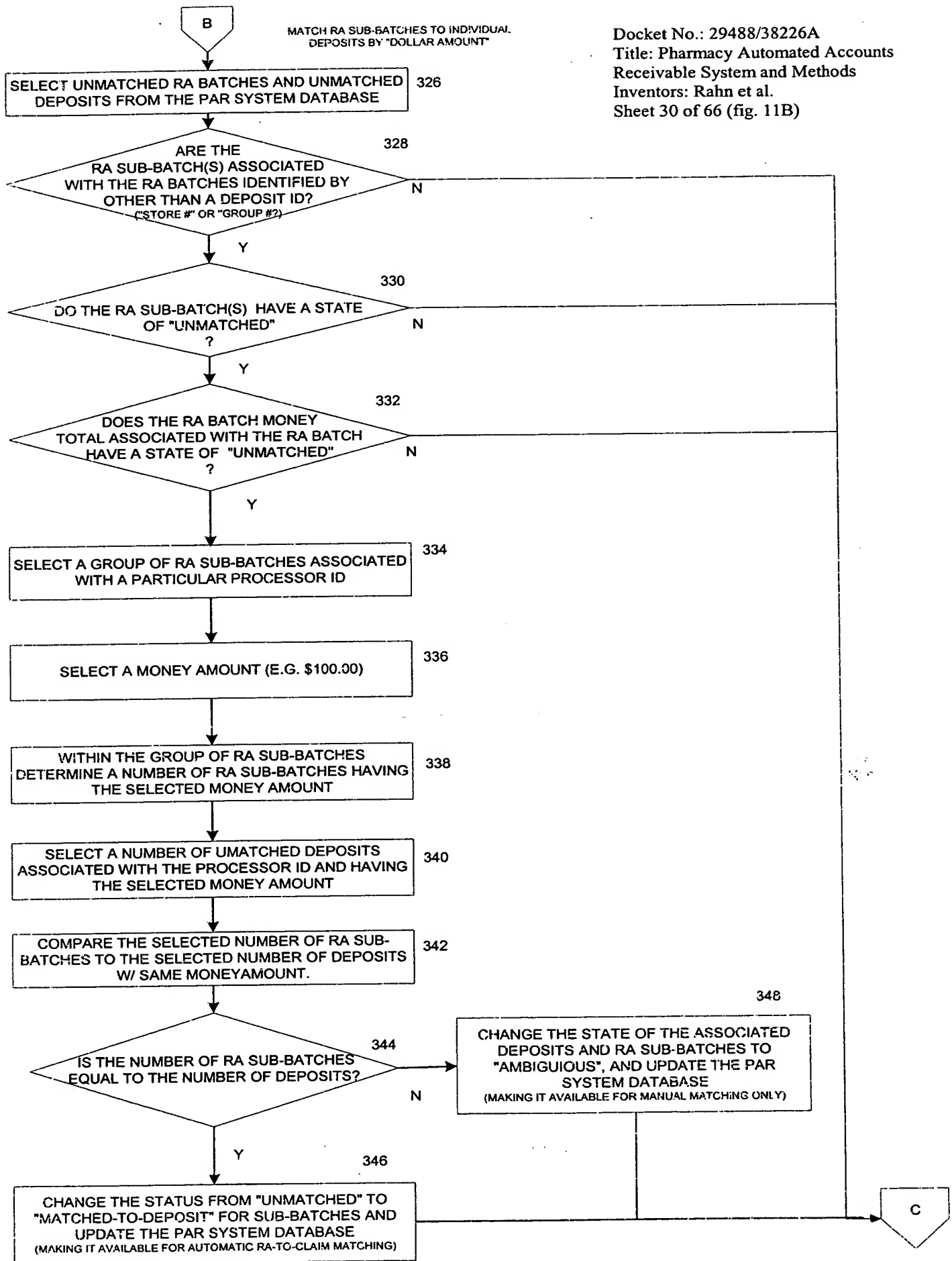
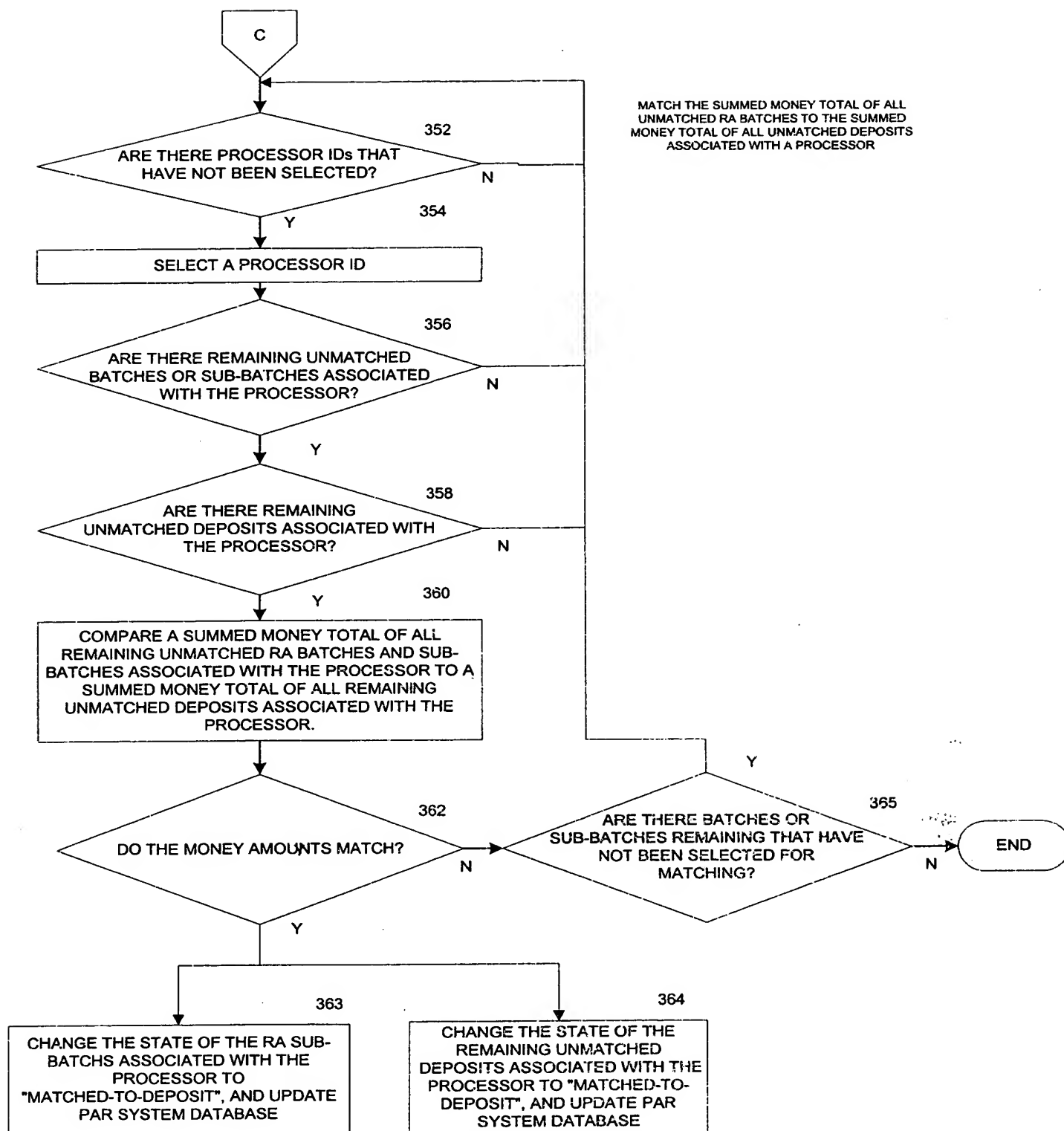


FIG. 11B



Docket No.: 29488/38226A
 Title: Pharmacy Automated Accounts
 Receivable System and Methods
 Inventors: Rahn et al.
 Sheet 31 of 66 (fig. 11C)

FIG. 11C

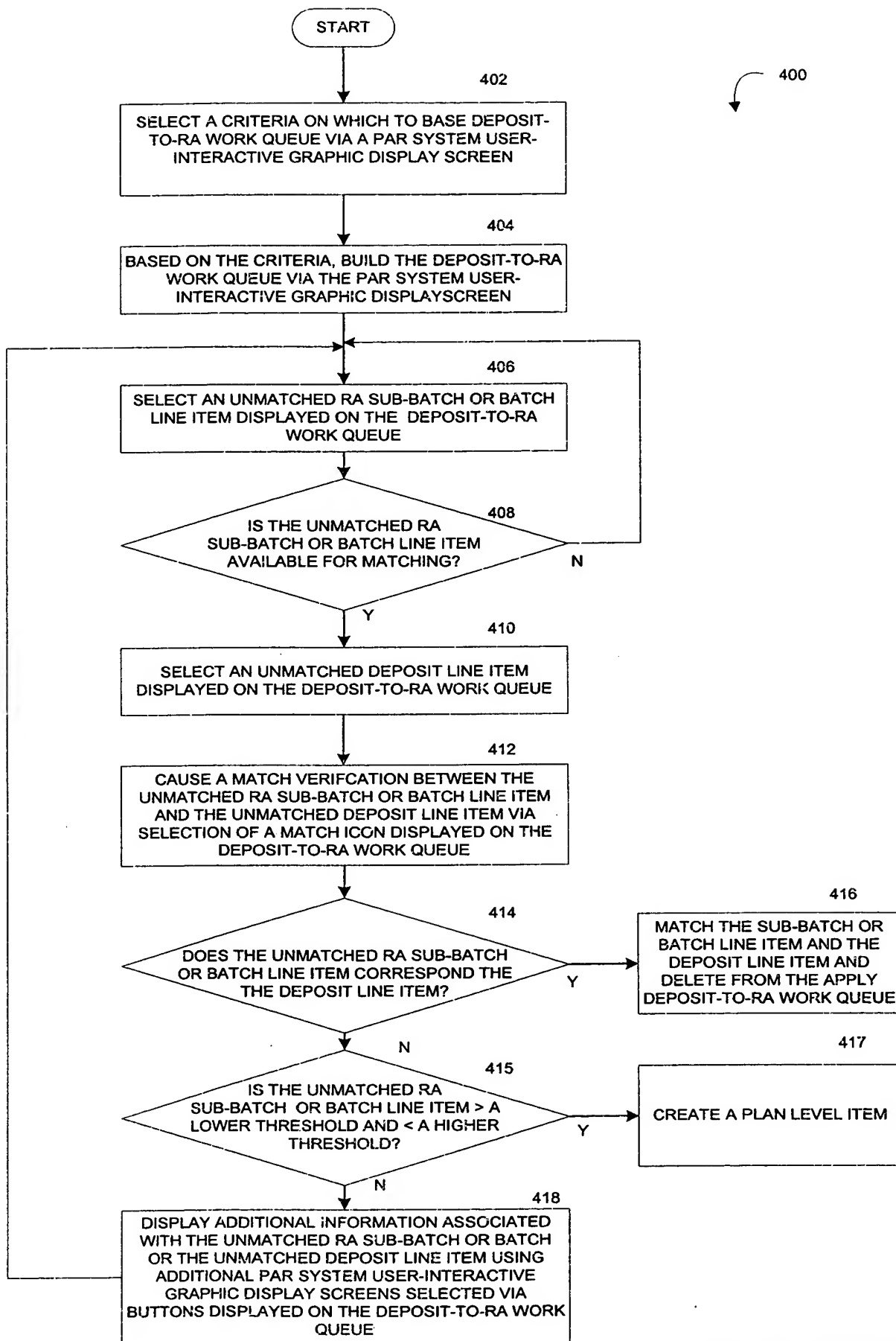


FIG. 12

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Title: Pharmacy Automated Accounts
Receivable System and Methods
Inventors: Rahn et al.
Sheet 33 of 66 (fig. 13A)

450

PARS Home - Microsoft Internet Explorer

D:\Ramu\Ramu Sourcesafe\PARS-Version2\Design\Screen\common\default.html

Walgreens Pharmacy Accounts Receivables System Double click here to expand or contract the Menu

Work Queues
Billing Exceptions
Collections
Deposit Entry
Deposits to RA
Payment Exceptions
Manual Billing
RA Entry
RA to Claims
Tools
Manage Deposits
Manage Plans
Apply Deposits to RA
Manage Claims
Manage RA
Apply RA to Claims
View Reports
Billing
PCS
Manage Lookup Tables
PARS Home
Logout
PARS Help

Build Work Queue by Deposit Date Build Work Queue by Rainbow Supervisor - Work Queue

Apply Deposits to RA

Build Work Queue by Deposit Date
Build Work Queue by Rainbow
Supervisor - Work Queue

Current Date: 10/12/2001

451
452

FIG. 13A

455

Build Payment Specialist Work Queue - Microsoft Internet Explorer

C:\NetSourceSafe\Walgreens\PARS-Version2\Design\Screens\ad a\BuildPaySpecialistWorkQueue_byDepData.htm

Build Work Queue by Deposit Data Build Work Queue by Remitter Supervisor - Work Queue

Current Date: 11/12/2001

Build Payment Specialist Work Queue

Unmatched RA's Deposit Totals

Work queue type:

☒ Remitter

☐ Deposit Data

Display Categories By:

☒ Relief

☒ Non-Relief

☐ Workers Comp

05/21/2000 06/21/2000

☒ Remember my Work Queue at Next Login.

Build Work Queue

FIG. 13B

460

Build Payment Specialist Work Queue - Microsoft Internet Explorer

C:\NetSource\Self\Work\apps\PARS-Version2\Design\Screen\led\BuildPaySpecialistWorkQueue_byRemitter.htm

Build Work Queue by Deposit Date Build Work Queue by Remitter Supervisor - Payment Specialist Work Queue

Build Payment Specialist Work Queue Current Date: 11/12/2001

Unmatched RA & Deposit Totals

Work queue type:
☒ Remitter
☐ Deposit Date

Display Categories By:
☒ Relief
☒ Non-Relief
☐ Workday Comp

BCDE
ABCCC
ALLST
Unknown

ABBCR
ABBZM
ABCD
AETNA
CIGNA

☒ Remember my Work Queue at Next Login

FIG. 13C

465

Payment Specialist Work Queue by Remitter - Microsoft Internet Explorer

C:\NoSourceSafe\Walgreens\PARS-Version2\Design\Screens\ad a\PaySpecWork_queue_Remitter.htm

Build Work Queue by Deposit Date Build Work Queue by Remitter Supervisor - Work Queue

Payment Specialist Work Queue by Remitter Current Date: 11/12/2001

Unmatched RA's Deposit Totals Per Remitter

Display Categories By:

☒ Refill
☒ Non-Refill
☒ Workers Comp

Remitter	Selected RA	Selected Deposits
PHARMACEUTICAL CARE NETWORK	\$165,000.00	\$200,000.00
Unknown	\$0.00	\$190,000.00
ABCDE	\$178,000.00	\$180,000.00
PCS	\$167,000.00	\$170,000.00
IMMED	\$152,000.00	\$160,000.00
AETNA	\$127,000.00	\$140,000.00
CIGNA	\$92,000.00	\$100,000.00
MEDICARE	\$117,000.00	\$120,000.00

466 467 468

469

FIG. 13 D

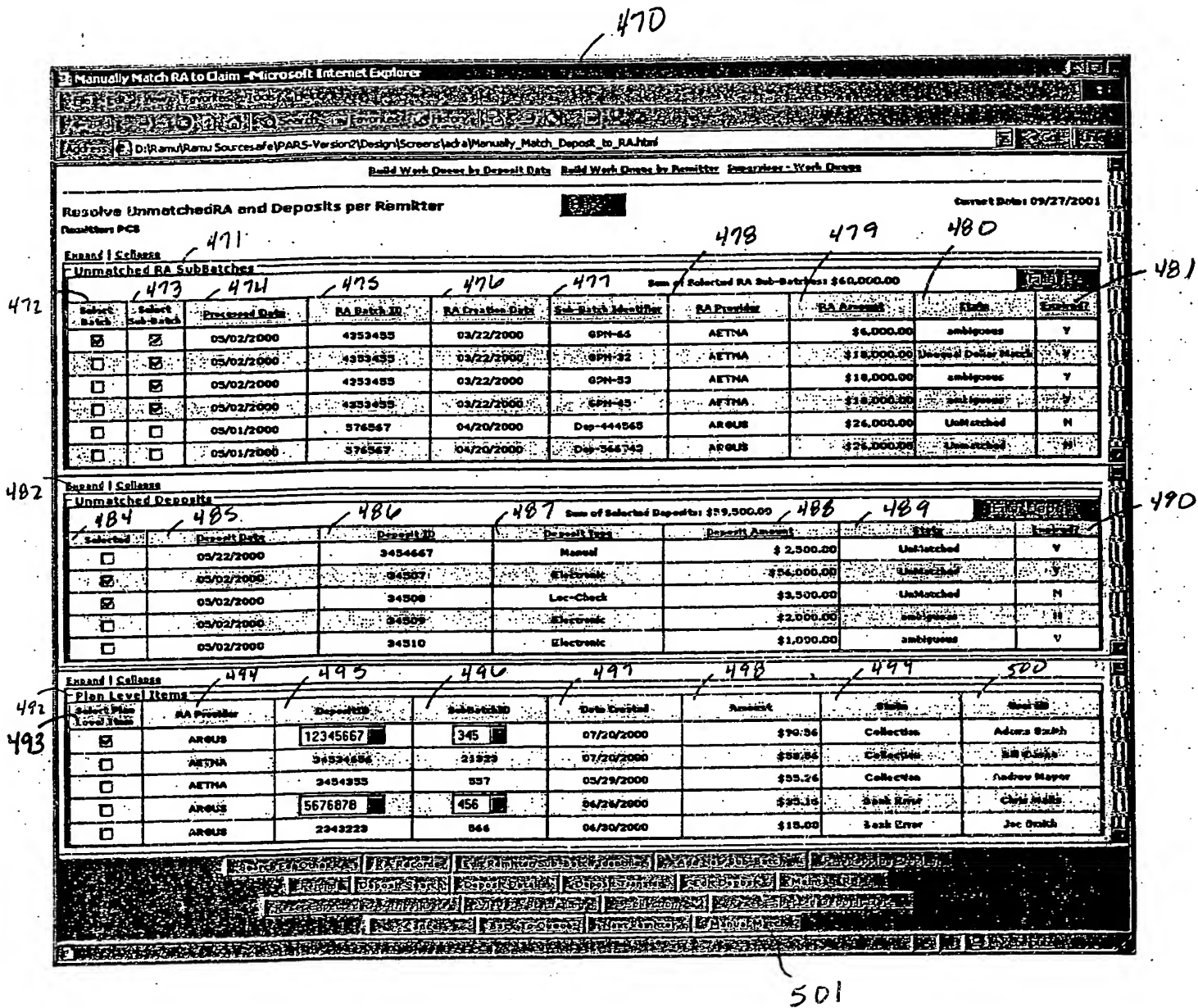


FIG. 13E

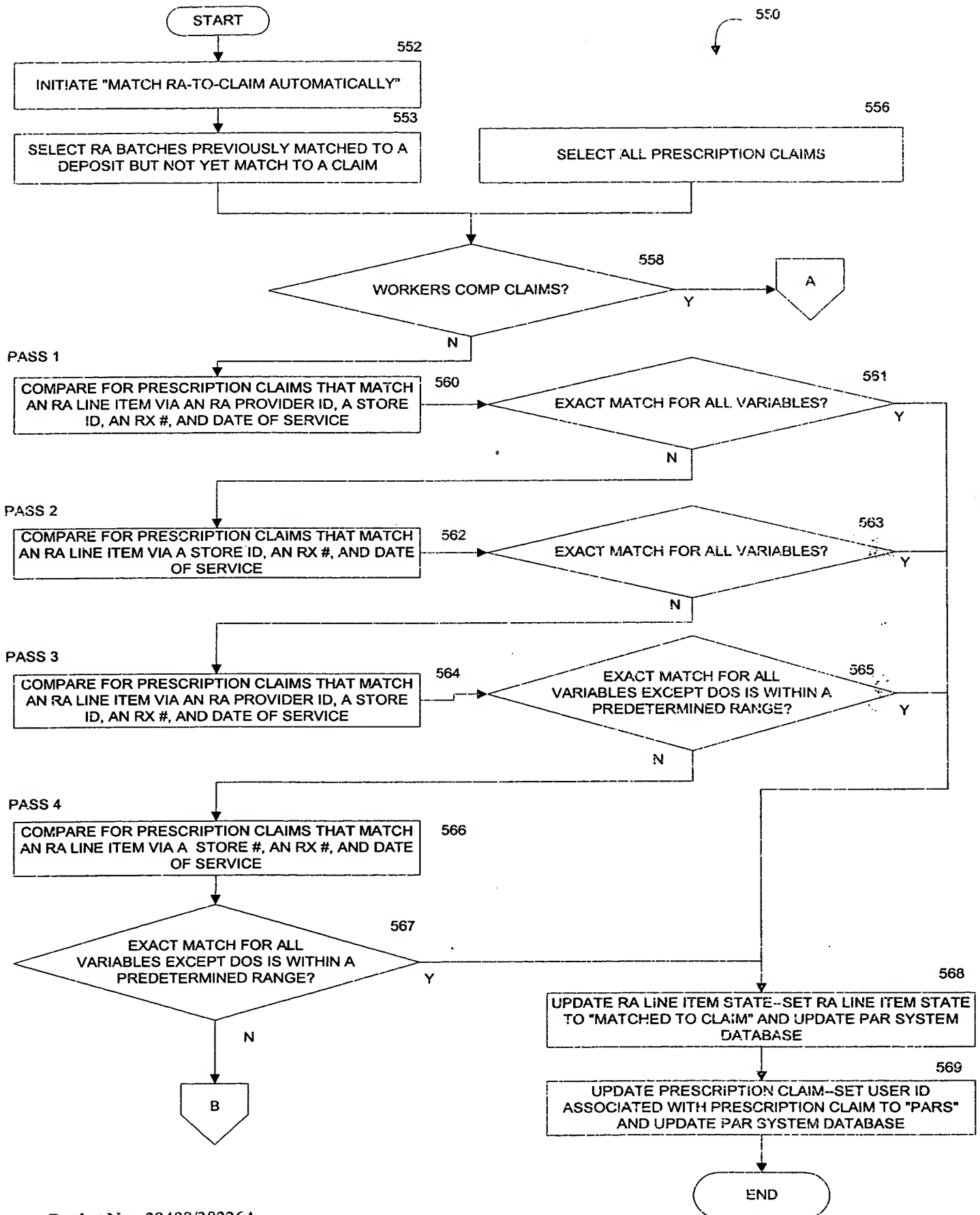


FIG. 14A

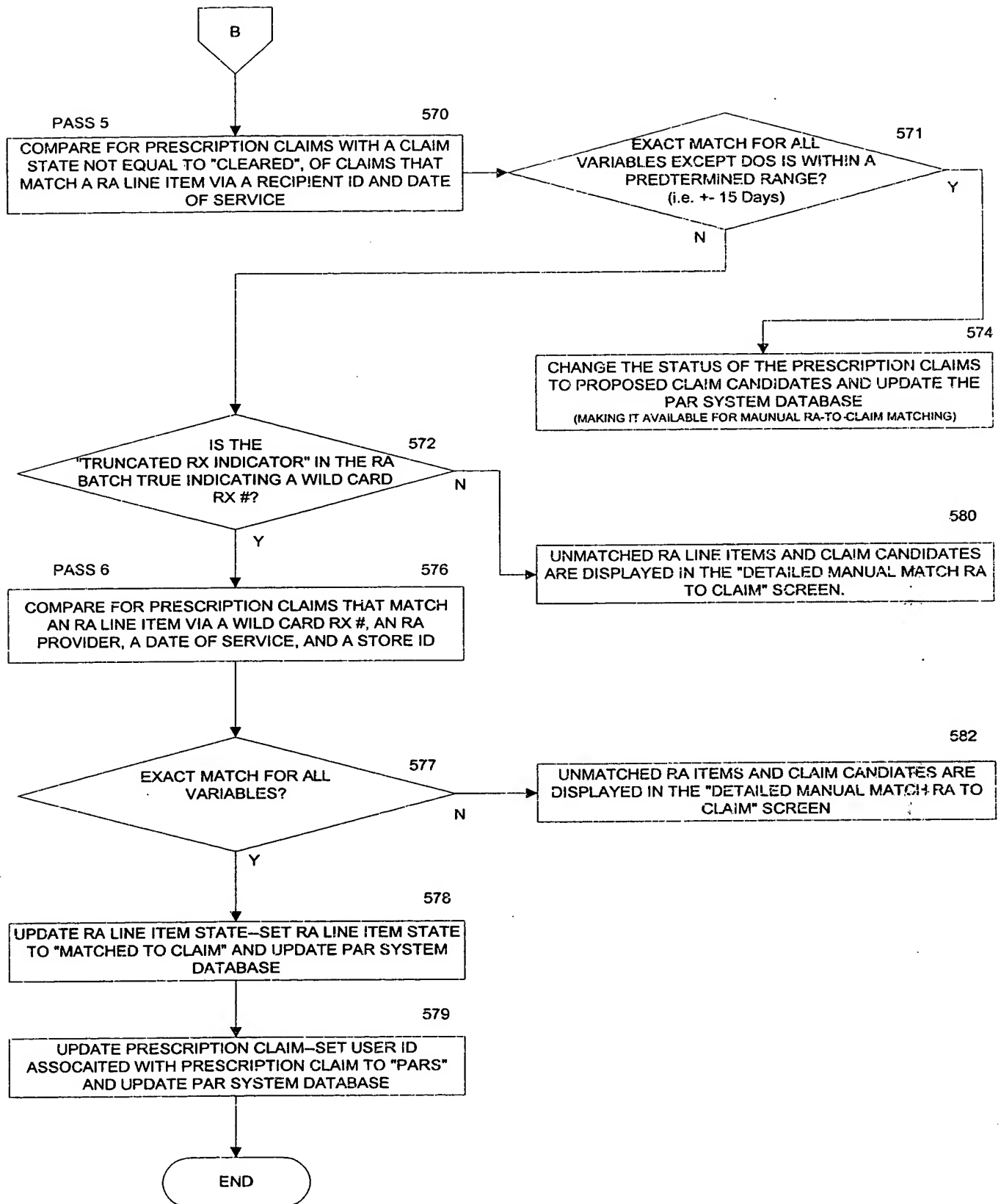


FIG. 14B

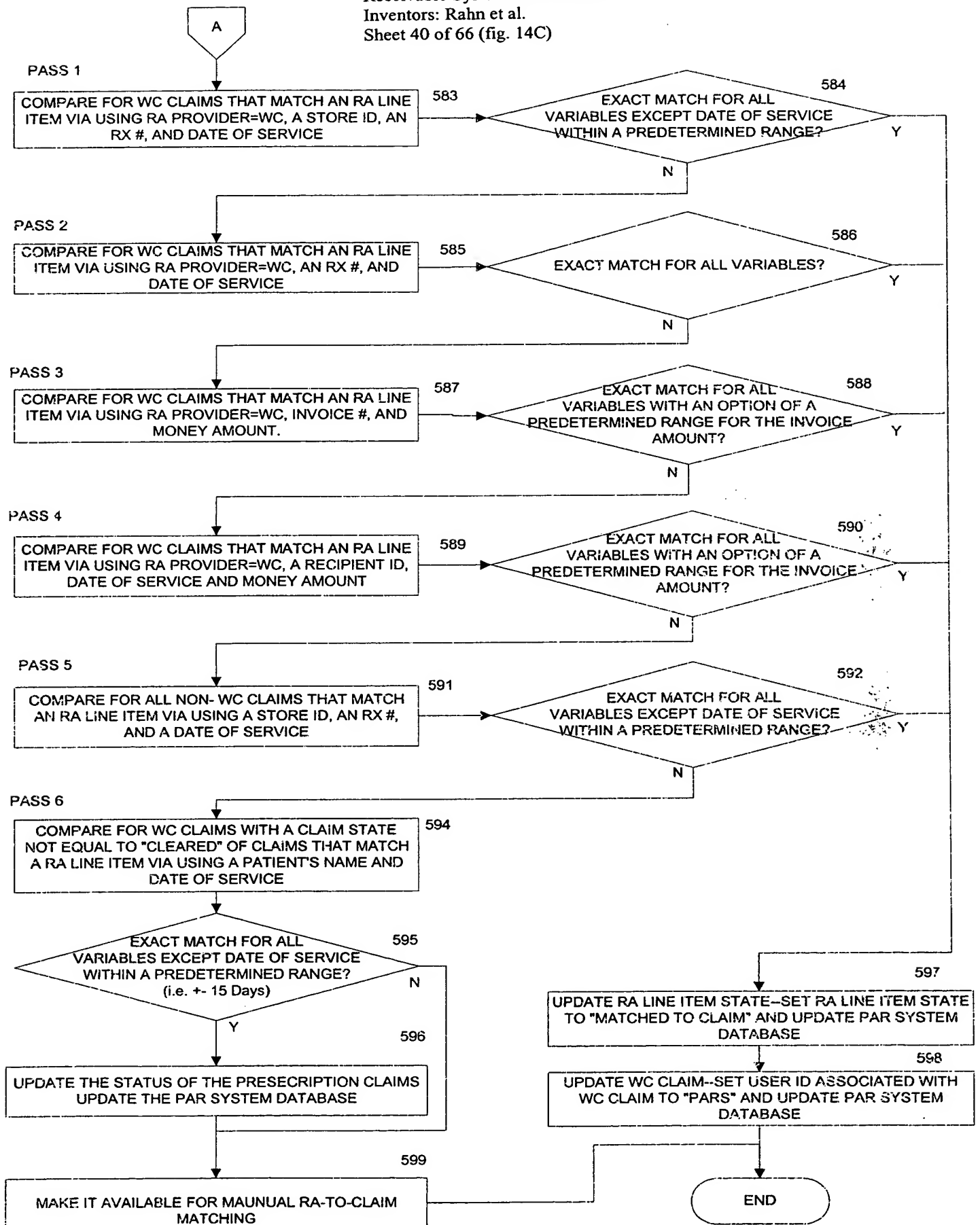


FIG. 14C

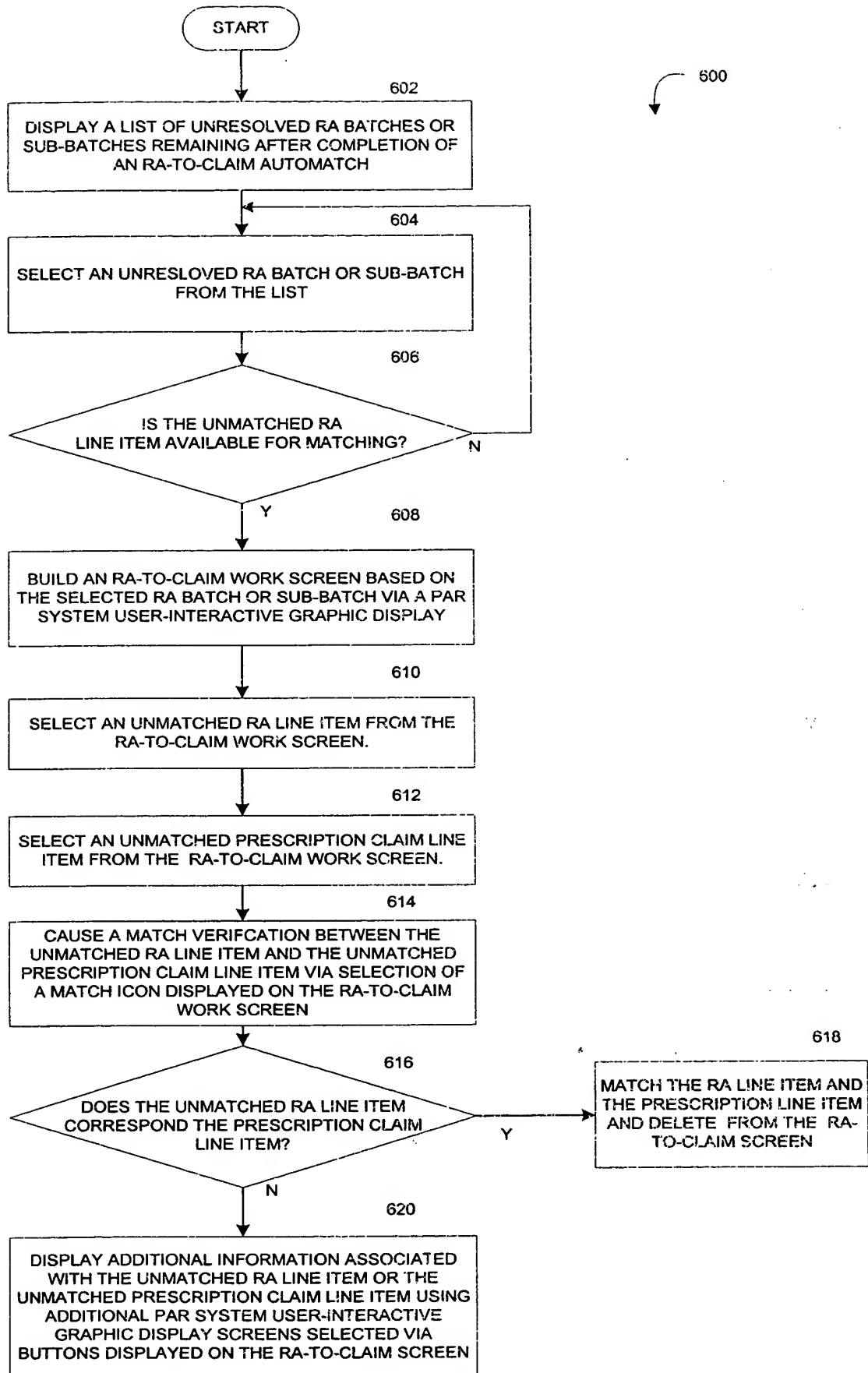


FIG. 15

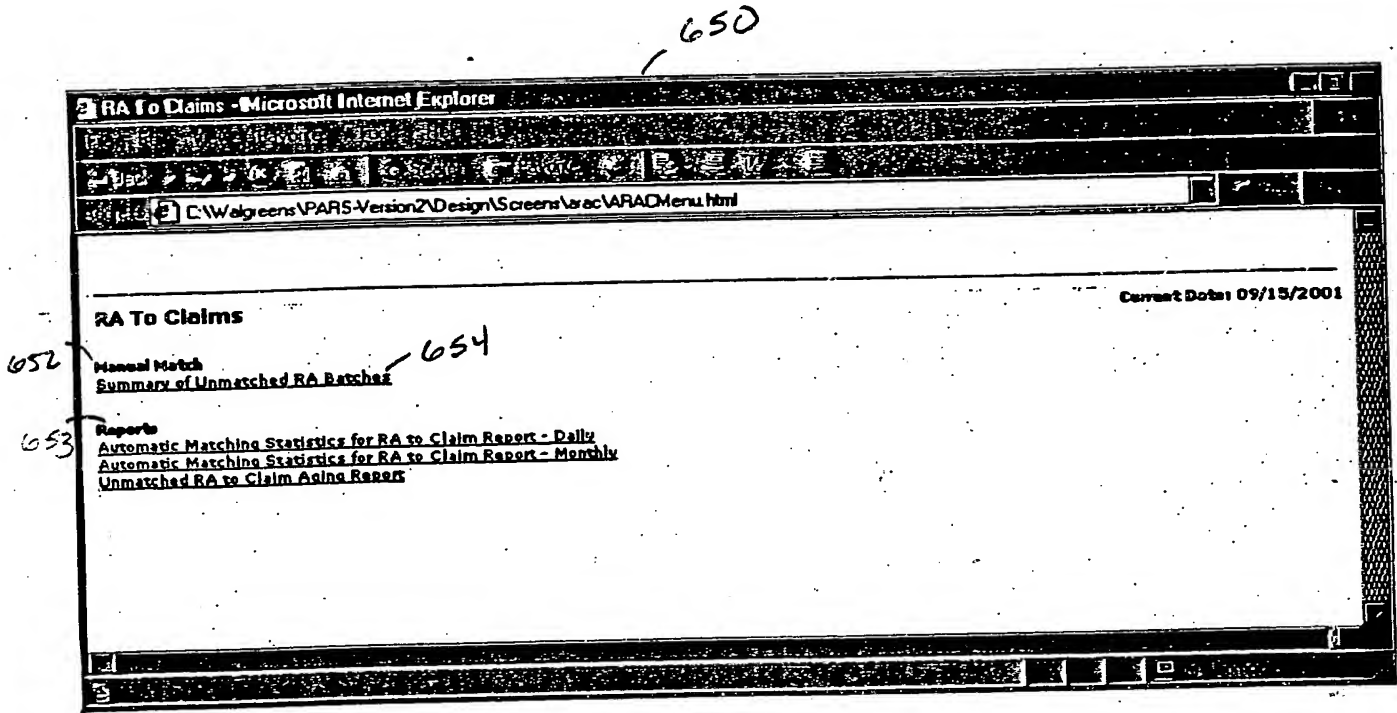


FIG. 16A

655

Summary of Unmatched RA Batches - Microsoft Internet Explorer

C:\Wolgens\PARS-Version2\Design\Screen\Loc\UnresolvedRAs.html

Current Date: 09/15/2001

656 Summary of Unmatched RA Batches 657 658 659 660 661 662

Sort view by clicking header or sort multiple columns by clicking here

	Batch Match Date	RA Provider	RA Provider Creation	Unmatched RA Line Status		
				Count	RA Amount	% Count
<input checked="" type="checkbox"/>	09/14/2001	ZYX	09/08/2001	1	\$100.00	1.0%
<input type="checkbox"/>	09/15/2001	ABC	09/08/2001	3	\$200.00	3.0%
<input type="checkbox"/>	09/15/2001	CDE	09/08/2001	2	\$150.00	2.3%
<input type="checkbox"/>	09/15/2001	HIJ	09/08/2001	1	\$100.00	1.3%
<input type="checkbox"/>	09/15/2001	KLM	09/08/2001	1	\$80.00	1.0%
<input type="checkbox"/>	09/15/2001	XYZ	09/08/2001	1	\$20.00	1.1%
<input type="checkbox"/>	09/15/2001	ZY XW VU TS RQ PO NM LK JI HG FE DC BA	09/08/2001	2	\$15.00	1.3%
Total:				11	\$545.00	2.2%

663

Unresolved RA Batches Summary of Unmatched RA Batches

FIG. 16B

670

Manually Match RA to Claim - Microsoft Internet Explorer

Current Date: 09/27/2001

Detail of Manual Match RA to Claim

Unmatched RA Line Items

Sort view by clicking header or sort multiple columns by clicking here

Store #	CPN	RA #	DOB	EM Disp	Patient Name	Referral #	Amount	Em Code	Em Patient
<input checked="" type="checkbox"/> 10023	123456789012	12345678	05/21/2000	1	Smith, John M.	123456789012345	\$100.00	1234	Patient not eligible.
<input type="checkbox"/> 236	1234567	23456789	05/21/2000	1	Wrightchenburg, Chris S.	345789889	\$200.00	824	Brand not loaded.
<input type="checkbox"/> 9289	123456764	34567890	05/21/2000	3	Smith, Michael W.	1238748593	\$1234567.00		
<input type="checkbox"/> 7653	1234567	45678901	05/21/2000	3	Jordan, Michael C.	1289728475	\$100.00		
<input type="checkbox"/> 3623	1234567485	56789012	05/21/2000	100	O'Darby, Ian D.	12384859	\$160.00	799	Patient encoded in

Sum of Selected: \$100.00

Proposed Claim Candidates

Sort view by clicking header or sort multiple columns by clicking here

CPN Store #	Invoice #	RA #	DOB	EM Disp	Patient Name	Referral #	AP Amount	Claim Balance	Plan ID
<input checked="" type="checkbox"/> 123456789012 10023	12345678	12345687	05/21/2000	1	Smith, John M.	123456789012345	\$50.00	\$45.00	SIGMA
<input type="checkbox"/> 1234236 236	12345678	23647878	05/21/2000	1	Wrightchenburg, Christopher S.	345723885	\$1234567.00	\$1234567.00	
<input type="checkbox"/> 1456723 567	12345678	39273767	05/21/2000	1	Smith, Michael W.	437337480			
<input type="checkbox"/> 1232567 2567	12345678	45253625	05/21/2000	3	Jordan, Michael C.	1789287465			
<input checked="" type="checkbox"/> 1234427 427	12345678	54345267	05/21/2000	3	O'Darby, Ian D.	221237485			

Sum of Selected: \$45.00

671 672 673 674 675 676 677 678 679 680 681 682 683 684 685 686 687 688 689 690 691 692 693 694 695

696

FIG. 16C

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Sheet 45 of 66 (fig. 16D)

FIG. 16D

FIG. 16E

710

Summary of Unmatched RA Sub-batches - Microsoft Internet Explorer							
C:\Wolgreens\PARS-Version2\Design\Screens\Varac\UnresolvedRASegments.html							
Summary of Unmatched RA Sub-batches							
Current Date: 09/15/2001							
Batch Match Date: 09/15/2001 RA Provider: XYZ RA Provider Creation Date: 09/06/2001							
Sort view by clicking header or sort multiple columns by clicking here							
Matched Deposit					Unmatched RA Line Items		
Date	Amount	ID	Batch #	Sequence #	Count	RA Amount	% Count
<input checked="" type="checkbox"/> 09/09/2001	\$150.00	92945	1299	128	2	\$150.00	2.3%
<input type="checkbox"/> 09/10/2001	\$100.00	2294	1334	10	5	\$200.00	5.0%
<input checked="" type="checkbox"/> 09/10/2001	\$200.00	12956	1331	66	1	\$100.00	1.0%
<input type="checkbox"/> 09/10/2001	\$100.00	12345	2212	3	1	\$50.00	5.1%
<input type="checkbox"/> 09/10/2001	\$100.00	12345	1334	103	2	\$15.00	1.3%
<input type="checkbox"/> 09/11/2001	\$1,200.00	54321	1334	104			
<input type="checkbox"/> 09/12/2001	\$500.00	65432	1334	105			
<input type="checkbox"/> 09/15/2001	\$885.00	72345	2212	1	1	\$80.00	1.8%
<input type="checkbox"/> 09/15/2001	\$1050.00	12345	2263	5	1	\$20.00	1.1%
Total:					11	\$445.00	2.2%

Manual Match Cancel

Collection Build Work Queue

PARS Home - Microsoft Internet Explorer

File Edit View Favorites Tools Help

Address http://devpars1.walgreens.com:81/pars3test1/servlet/walgreens.pars.arch.PARSProxy/

Home Billing Exceptions Deposits Investigate Claims Payment Exceptions RA Entry Report Queries Logout
Billing Collections Deposits to RA Maintenance Plans / Processors RA to Claims Supervisor PARS Help

Build Work Queue by Reminder Name Build Work Queue by Plan ID Build Work Queue by Center Name

Build Work Queue 720 Current Date: 06/16/2003

Build Work Queue for Collections

Work queue type:
☐ Plan Collection
☐ Claims Collection
☐ Plan Level Items

Display Categories By:
☐ Relief
☐ Non-Relief
☐ Relief and Non-Relief
☐ Workers Comp

Build By:
☐ Carrier Summary
☐ Case Summary

Find Matches Add To Queue

☐ Supervisor Items Only

☒ Remember my Work Queue at Next Login

Create My Work Queue

Done Start Nancy Rahn - Drafts - Lot... PARS Home - Microsoft... Microsoft Word - Docume... 6:43 PM

FIG. 17A

PARS Home - Microsoft Internet Explorer

File Edit View Favorites Tools Help

Address http://devpar1.walgreens.com:81/par3test1/servlet/walgreens.pars.arch.PARSPRXY/

Home Billing Exceptions Deposits Investigate Claims Payment Exceptions RA Entry Report Queries Logout
 Billing Collections Deposits to RA Maintenance Plans / Processors RA to Claims Supervisor PARS Help

Build Work Queue Build Exceptions Work Queue

Billing Exceptions Work Queue Current Date: 06/24/2003

Sort on Multiple Fields Prev 1 - 15 of 15 Next Refresh Queue Filter Queue

	Days Left to Bill	Resubmit	Alternate	Claim ID	Product ID	Store #	POS #	POS	Claim Balance	Exception Code / Description	Partial Bill Code	Comments
123	123	ILLINOIS MEDICAID	ILMED	046629818	2827	632811	04/20/2003	\$88.79	65: SVC INV AGE			
124	124	ILLINOIS MEDICAID	ILMED	097180905	5034	225075	03/01/2003	\$71.97	75: NOT PREFERRED			
124	124	ILLINOIS MEDICAID	ILMED	183952692	5034	196175	05/01/2003	\$59.31	65: NOT ELIGIBLE			
125	125	ILLINOIS MEDICAID	ILMED	091471219	5034	240875	05/02/2003	\$120.48	75: NOT PREFERRED			
125	125	ILLINOIS MEDICAID	ILMED	116850470	5034	240870	05/02/2003	\$94.31	41: BILL MEDR B			
125	125	ILLINOIS MEDICAID	ILMED	067901173	5034	240975	05/02/2003	\$39.26	65: NOT ELIGIBLE			
125	125	ILLINOIS MEDICAID	ILMED	067901173	5034	240974	05/02/2003	\$20.71	65: NOT ELIGIBLE			
125	125	ILLINOIS MEDICAID	ILMED	16423119	5034	241016	05/02/2003	\$14.76	07			
125	125	ILLINOIS MEDICAID	ILMED	156105082	5034	240837	05/02/2003	\$10.20	65: NOT ELIGIBLE			
126	126	ILLINOIS MEDICAID	ILMED	066818592	3073	609992	05/03/2003	\$742.07	41: BILL MEDR B			
126	126	ILLINOIS MEDICAID	ILMED	140680039	2589	953094	05/03/2003	\$16.56	75			
127	127	ILLINOIS MEDICAID	ILMED	161398578	2809	1085112	05/04/2003	\$259.03	18: MAX QTY 62			
127	127	ILLINOIS MEDICAID	ILMED	159510486	4407	2271981	05/04/2003	\$55.29	65: SPENDDOWN			

Cancel Chargeback Reverse Deny Reverse Online Rebill Edit Claim Detail

Done Start Nancy Rahn - Drafts - Lot PARS Home - Microsoft Microsoft Word - Fig 17B 6:34 PM

FIG. 17B

Billings Build Work Queue

PARS Home - Microsoft Internet Explorer

File Edit View Favorites Tools Help

Address <http://dev.pars1.welgroens.com:81/pars3ad11/servlet/welgroens.pars.arch.PARSProxy/>

Home Billing Exceptions Deposits Investigate Claims Payment Exceptions RA Entry Report Queues Logout
Billing Collections Deposits to RA Maintenance Plans / Processors RA to Claims Supervisor PARS Help

Build Work Queue Current Date: 05/26/2003

Build Work Queue for Billings 734

Work queue types

- ☐ Workers Compensation Billing Work Queue
- ☐ Invoice Special Handling Work Queue
- ☐ Claims Special Handling Work Queue
- ☐ Temporary Plan ID Update Work Queue

Display Categories By:

- ☒ Relief
- ☒ Non-Relief
- ☒ Workers Comp

Plan ID:

End Matches Add To Queue

Work Queue

INDME

☒ Remove or my Work Queue at Next Login

Creates My Work Queue

Done

Start Nancy Rahn - Drafts - Lot... PARS Home - Microsoft Microsoft Word 6:36 PM

FIG. 17C

Claims Special Handling Work Queue

PARS Home - Microsoft Internet Explorer

File Edit View Favorites Tools Help

Address http://devpars1.walgreens.com:81/pars3test1/servlet/walgreens.pars.arch.PARSProxy/

Home Billing Exceptions Deposits Investigate Claims Payment Exceptions RA Entry Report Queries Logout
 Billing Collections Deposits to RA Maintenance Plans / Processors RA to Claims Supervisor PARS Help

Claims Special Handling Work Queue Current Date: 06/26/2003

Sort on Multiple Fields 1 - 14 of 14 Refresh Enter Queue

	Days Left to Bill												
<input type="checkbox"/>	Calendar	Alt Calendar	Doc #	Item #	POS	Plan ID	AR Amount	Claim Balance	Rejection ID	Batch Process Date	OSI Match	Transfer Plan	
<input type="checkbox"/>	-59	276	678774	2652	02/29/2003	INDME	\$3.00	\$3.00		06/23/2003	N	N	
<input type="checkbox"/>	-22	308	567992	2657	04/23/2003	INDME	\$15.00	\$15.00		06/23/2003	N	N	
<input type="checkbox"/>	-29	306	1208114	3680	04/28/2003	INDME	\$2.49	\$2.49		06/23/2003	N	N	
<input type="checkbox"/>	-25	310	574927	3214	05/02/2003	INDME	\$16.47	\$16.47	103329943799	06/03/2003		N	
<input type="checkbox"/>	-25	310	574921	3214	05/02/2003	INDME	\$11.97	\$11.97	103529943799	06/03/2003		N	
<input type="checkbox"/>	-24	311	1832230	3223	05/03/2003	INDME	\$74.99	\$74.99	100510132299	06/03/2003		N	
<input type="checkbox"/>	-24	311	455756	4371	05/03/2003	INDME	\$59.95	\$59.95	100264650199	06/03/2003		N	
<input type="checkbox"/>	-24	311	1892209	3223	05/03/2003	INDME	\$15.09	\$15.09	100510132299	06/03/2003		N	
<input type="checkbox"/>	-24	311	436185	2799	05/03/2003	INDME	\$3.50	\$3.00	100615682099	06/03/2003		N	
<input type="checkbox"/>	-23	312	486369	3194	05/04/2003	INDME	\$77.98	\$77.98	100438556199	06/06/2003		N	
<input type="checkbox"/>	-23	312	486370	3194	05/04/2003	INDME	\$12.49	\$12.49	100438556199	06/06/2003		N	
<input type="checkbox"/>	-22	312	521929	2796	05/05/2003	INDME	\$330.49	\$330.49	101120716299	06/06/2003		N	
<input type="checkbox"/>	-22	312	1647313	3352	05/03/2003	INDME	\$119.98	\$119.98	100363482799	06/11/2003		N	
<input type="checkbox"/>	-21	314	717225	6151	05/06/2003	INDME	\$23.70	\$23.00	100507743199	06/11/2003		N	

Cancel Claim History Edit Claim Detail

Done Start Nancy Rahn - Drafts - Lot... PARS Home - Microsoft Word 6:37 PM

FIG. 17D

Invoice Special Handling Work Queue

PARS Home - Microsoft Internet Explorer

File Edit View Favorites Tools Help

Address <http://devpars1.walgreens.com:81/par3test1/servlet/walgreens.pars.arch.PARSProxy/>

Home Billing Exceptions Deposits Investigate Claim Payment Exceptions RA Entry Report Queries Logout
Billing Collections Deposits to RA Maintenance Plans / Processors RA to Claims Supervisor PARS Help

Invoice Special Handling Work Queue **740** Current Dates 06/26/2003

Sort on Multiple Fields

Plan ID	Invoice Number	Total Credit	Total Amount A	Refund Period	Invoice Date
---------	----------------	--------------	----------------	---------------	--------------

Done Start Internet Nancy Rahn - Drafts - Lot... PARS Home - Microsoft... Microsoft Word - Docume... 6:42 PM

FIG. 17 E

Worker Comp Billing Work Queue

PARS Home - Microsoft Internet Explorer

File Edit View Favorites Tools Help

Address http://devpars1.walgreens.com:81/parsTest1/servlet/walgreens.pars.arch.PARSPProxy/

Home Billing Exceptions Deposits Investigate Claims Payment Exceptions RA Entry Report Queries Logout
 Billing Collections Deposits to RA Maintenance Plans / Processors RA to Claims Supervisor PARS Help

745

Worker Compensation Billing Work Queue Current Date: 04/26/2003

Set on Multiple Fields < Prev 1 - 5 of 30 Next > Refresh Filter Queue

Plan ID	Name	City	Business ID	Employee	Amount	Effective Date	Due Date	Due Date	Due Date	Due Date
WCIN	ST ANTHONY MED CTR EMPL HEALTH	CROWN POINT	22	ST ANTHONY MED CTR EMP HEALTH	\$17.81	04/26/2003	05/06/2003	537000	1712	Yes
WCIN	LIBERTY MUTUAL	SCHAUMBURG	303641789	AMTRAN	\$21.87	01/09/2002	05/06/2003	1711373	1696	Yes
WCIN			303862493	TIMBERLAND RV COMPANY	\$51.45	05/02/2003	05/06/2003	978909	1703	
WCIN			303862493	TIMBERLAND RV COMPANY	\$25.55	05/02/2003	05/06/2003	978908	1703	
WCIN			304026088	ST. ANTHONY'S MEDICAL CENTER	\$9.29	05/04/2003	05/05/2003	537430	1712	

Cancel Plan Transfer Investigate Claim Search Update WC Data Edit Claim Detail

Done Internet

Start Nancy Rahn - Drafts - Lot... PARS Home - Microsoft... Microsoft Word - Document... 6:33 PM

FIG. 17 F

PARS Home - Microsoft Internet Explorer

File Edit View Favorites Tools Help

Back Forward Stop Search Favorites Mode Links

Address http://devpars1.walgreens.com:81/pars3test1/servlet/walgreens.pars.arch.PARSPProxy/

Home Billing Exceptions Deposits Investigate Claims Payment Exceptions RA Entry Report Queries Logout
Billing Collections Deposits to RA Maintenance Plans / Processors RA to Claims Supervisor PARS Help

Retro Entry Current Date: 06/26/2003

Current Entries: (To edit an entry, click its Line number in the Current Batch Entries listed below.)

Plan ID (?)	Store Number (?)	RX Number (?)	DOB(?)	Amount(?)

822

Retro Batch Summary (Running Totals)

Retro Amounts	Amount	Count
Running Total of Retro Claims Entered:	\$0.00	0
Remaining to be Reconciled:	\$0.00	0

Done Start Nancy Rahn - Drafts - L... PARS Home - Microsof... Microsoft Word Internet 6:35 PM

FIG. 18A

850

Results 1-6 of 200.

	User ID: (Entered by)	Date Entered:	Document Date:	Plan ID:	Patient Name:	RX #:	Store #:	DOS:	User ID: (last worked by)	Comments:
<input type="checkbox"/>	DAH	01/25/2000	01/25/2000	ABC	Charles M. Williams	1234567	1234567	01/25/2000	DAH	
<input type="checkbox"/>	BAS	01/25/2000	01/25/2000	BASF	Dave A. Hebert	1234567	1234567	01/25/2000	DAH	
<input type="checkbox"/>	SDS	01/25/2000	01/25/2000	OLMP	Steve S. Gommers	1234567	1234567	01/25/2000	DAH	
<input type="checkbox"/>	KAA	01/25/2000	01/25/2000	YTWCK	Knut R. Axelsson	1234567	1234567	01/25/2000	DAH	
<input type="checkbox"/>	GHI	01/25/2000	01/25/2000	HUNV	Vivian Sovinsky	1234567	1234567	01/25/2000	DAH	
<input type="checkbox"/>	GHI	01/25/2000	01/25/2000	OLE	Andrew C. Meyer	1234567	1234567	01/25/2000	DAH	

FIG. 18B

Fig 18C

PARS Home - Microsoft Internet Explorer

File Edit View Favorites Tools Help

Address http://devpar1.walgreens.com:81/par3test1/servlet/walgreens.pars.arch.PAR3Proxy/

Home Billing Exceptions Deposits Investigate Claims Payment Exceptions RA Entry Report Queries Logout
Billing Collections Deposits to RA Maintenance Plans / Processors RA to Claims Supervisor PARS Help

Build Permanent Escrow Work Queue

Payment Exception Work Queue 880 Current Date: 06/26/2003
Work Queue Type: Plan ID Category: Relief, Non-Relief Types: Expired

Sort on Multiple Fields Page 1 - 100 of 861 Next >

<input type="checkbox"/>	Benefit Name	Plan ID / Attachment	Recipient ID	Start Date	End Date	DOB	Last RA Amt	Balance	Current Status / Follow-up Date	Deposit Date / RA Location
<input type="checkbox"/>	ILLINOIS MEDICAID (84)	ILMED	158212910	109	2619240251	PF-ACC	04/10/03	(\$124.40)	06/17/03	
<input type="checkbox"/>	ILLINOIS MEDICAID (84)	ILMED	019437780	2986	3621270396	FD-ACC	04/14/03	(\$22.71)	06/17/03	
<input type="checkbox"/>	ILLINOIS MEDICAID (84)	ILMED	098669195	2986	3621270396	FD-ACC	04/14/03	(\$154.17)	06/17/03	
<input type="checkbox"/>	ILLINOIS MEDICAID (84)	ILMED	114221518	2986	3621270396	FD-ACC	04/14/03	(\$25.83)	06/17/03	
<input type="checkbox"/>	ILLINOIS MEDICAID (84)	ILMED	020983862	2986	3621270396	FD-ACC	04/15/03	(\$99.69)	06/17/03	
<input type="checkbox"/>	ILLINOIS MEDICAID (84)	ILMED	089140941	3076	1545949	PF-ACC	04/16/03	(\$4.94)	06/17/03	
<input type="checkbox"/>	ILLINOIS MEDICAID (84)	ILMED	163298879	4602	3621270396	PF-ACC	04/16/03	(\$4.71)	06/17/03	
<input type="checkbox"/>	ILLINOIS MEDICAID (84)	ILMED	017031346	2986	3621270396	FD-ACC	04/17/03	(\$18.60)	06/17/03	
<input type="checkbox"/>	ILLINOIS MEDICAID (84)	ILMED	050460021	2199	1646404	PF-ACC	04/17/03	(\$2.11)	06/17/03	
<input type="checkbox"/>	ILLINOIS MEDICAID (84)	ILMED	087979381	2199	1646404	PF-ACC	04/17/03	(\$49.55)	06/17/03	

Cancel Reset Dayback Claim History

Payback Status: [Dropdown]
Follow-up Date: [Text]
Number Of Days Until Follow-up: [Text]
Comments: [Text]
Save Status

Done Start Nancy Rahn - Drafts - Lot PARS Home - Microsoft 6:27 PM

FIG. 18C

FIG. 18D

Claim Collection Plan Summary

PARS Home - Microsoft Internet Explorer

File Edit View Favorites Tools Help

Back Forward Stop Search Favorites Mode Print

Address http://devpars1.walgreens.com:81/pars3test1/servlet/walgreens.pars.arch.PARSProxy/ Go Links

Home Billing Exceptions Deposits Investigate Claim Payment Exceptions RA Entry Report Queries Logout
 Billing Collections Deposits to RA Maintenance Plans / Processors RA to Claims Supervisor PARS Help

898 Build Work Queue by Remitter Name Build Work Queue by Plan ID Build Work Queue by Carrier Name

Claim Collections Plan Summary Current Date: 06/26/2003

Sort on Multiple Fields Prev 1 - 2 of 2 Next Refresh Queue Filter Queue

Select	Remitter Name	Plan ID	No. of Claims	Total Amount	Problem Category	DOS of oldest claim	Submitting Window	Number Unresolved	Amount Unresolved
16	ILLINOIS MEDICAID	ILMED	111	\$7,992.97	RESEARCH	04/18/2003	10	111	\$7,992.97
17	ILLINOIS MEDICAID	ILMED	60	\$1,982.21	NOT PAID	11/21/2002	10	60	\$1,982.21

Cancel Item Summary Show Claim Collection Work Queue

Done Start Nancy Rahn - Drafts - Lot... PARS Home - Microsoft... Microsoft Word - Docume... Internet 6:44 PM

FIG. 18E

Worker Comp Claim Collection Case Summary

PARS Home - Microsoft Internet Explorer

File Edit View Favorites Tools Help

Address: http://devpars1.welgreens.com:81/parsTest1/servlet/welgreens.pars.arch.PARSProxy/

Home Billing Exceptions Deposits Investigate Claims Payment Exceptions RA Entry Report Queries Logout
Billing Collections Deposits to RA Maintenance Plans / Processors RA to Claims Supervisor PARS Help

Build Work Queue by Remitter Name Build Work Queue by Plan ID Build Work Queue by Carrier Name

Workers Compensation Claim Collections Case Summary **895** Current Date: 06/26/2003

Sort on Multiple Fields Page 1 - 100 of 1109 Next Refresh Queue Filter Case Summary

Select	Participant ID	Effective Date	# Of Part Des	Total Balance of Part Des Claims	# Of Un-Worked Claims	Total AR Amount of Un-Worked Claims	Total Balance of Un-Worked Claims	% Balance to AR	ROS of Oldest Claim
<input type="checkbox"/>	310686459	05/19/1999	17	\$2,913.96	17	\$2,913.96	\$2,913.96	0.00%	03/24/2003
<input type="checkbox"/>	305726292	02/11/1994	20	\$2,592.31	20	\$2,592.37	\$2,592.31	0.00%	03/03/2003
<input type="checkbox"/>	311640878	05/22/1995	10	\$2,323.42	10	\$2,615.54	\$2,323.42	0.00%	03/18/2003
<input type="checkbox"/>	380324959	07/13/2001	19	\$2,203.60	19	\$2,748.59	\$2,203.60	0.00%	03/21/2003
<input type="checkbox"/>	307629382	04/12/1998	4	\$2,017.54	4	\$2,017.54	\$2,017.54	0.00%	04/16/2003
<input type="checkbox"/>	303625483	12/30/1986	12	\$2,004.85	12	\$2,004.85	\$2,004.85	0.00%	04/02/2003
<input type="checkbox"/>	312788945	02/08/2000	10	\$1,657.30	10	\$1,657.30	\$1,657.30	0.00%	03/03/2003
<input type="checkbox"/>	407665908	10/13/1991	2	\$1,622.50	2	\$1,622.50	\$1,622.50	0.00%	03/21/2003
<input type="checkbox"/>	317868445	12/07/2000	8	\$1,618.01	8	\$1,618.01	\$1,618.01	0.00%	03/18/2003
<input type="checkbox"/>	317561676	07/09/2002	5	\$1,515.78	5	\$2,705.92	\$1,515.78	0.00%	03/23/2003
<input type="checkbox"/>	558369698	12/21/1971	14	\$1,495.82	14	\$1,607.20	\$1,495.82	0.00%	03/02/2003
<input type="checkbox"/>	304866351	01/04/2000	9	\$1,139.00	9	\$1,139.00	\$1,139.00	0.00%	03/20/2003
<input type="checkbox"/>	316623472	09/17/1998	5	\$1,054.62	5	\$1,054.62	\$1,054.62	0.00%	02/07/2003
<input type="checkbox"/>	309744788	07/12/2000	12	\$1,052.65	12	\$1,072.51	\$1,052.65	0.00%	03/05/2003
<input type="checkbox"/>	308064140	11/04/1999	7	\$1,043.62	7	\$1,043.62	\$1,043.62	0.00%	03/11/2003
<input type="checkbox"/>	402062436	03/07/2002	7	\$1,011.71	7	\$1,011.71	\$1,011.71	0.00%	04/03/2003
<input type="checkbox"/>	314483590	02/12/2002	3	\$955.07	3	\$955.07	\$955.07	0.00%	04/23/2003
<input type="checkbox"/>	316442858	11/30/2000	13	\$912.38	13	\$912.38	\$912.38	0.00%	03/15/2003
<input type="checkbox"/>	317429091	04/06/1995	6	\$858.46	6	\$858.46	\$858.46	0.00%	03/21/2003
<input type="checkbox"/>	313749656	12/22/1998	5	\$851.99	5	\$851.99	\$851.99	0.00%	04/10/2003
<input type="checkbox"/>	307769077	03/10/2001	8	\$849.61	8	\$858.00	\$849.61	0.00%	03/21/2003
<input type="checkbox"/>	305070000	01/03/1999	10	\$809.78	10	\$809.78	\$809.78	0.00%	03/18/2003

Done Start Nancy Rahn - Drafts - Lok... PARS Home - Microsoft Microsoft Word 6:49 PM

FIG. 18 F

900

Manual Adjustment - Microsoft Internet Explorer

Address: 2\Design\Screen\Adjustment\Manual_Adjustment.htm

Manual Adjustment Current Date: 09/19/2001

Claim Information

Claim #: 123457	Claim Balance: \$12,250.00	Store Number: 1234567	Invoice Number: 1234567
Date: 03/01/2000	Plan ID: ABCDE	CPN: 1234567	
Adjudicator: Star Process	Recipient ID: 1234567	Patient: C. M. Williams	

Claim Comments

(05/23/20 12:35 pm EDT) Knute Axelsson
These are textual comments authored by anyone working the claim.

(05/24/20 6: pm EDT) Dave Hebert

Adjustment Information

Adjustment Type: Chargeback 902

Adjustment Reason: Amount Below Threshold

Adjustment Amount \$: 12,250.00 (*)

Calculated Balance \$: 0.00

Cancel Refresh Print Save

FIG. 19A

920

Manual Adjustment - Plan Transfer - Microsoft Internet Explorer

http://www.ign.com/adjustment/Manual_Adjst_PlanTransfer.htm

Manual Adjustment - Plan Transfer Current Date: 05/19/2001

Claim Information

Rs #: 123457	Claim Balance: \$12,500.00	Store Number: 1234567	Invoice Number: 1234567
Due: 03/01/2000	Plan ID: ABCDE	CPN: 1234567	
Adjudicator: Star Process	Recipient ID: 1234567	Patient: C. M. Williams	

Claim Comments

(05/23/20 12:35 pm EDT) Knute Axelson
These are textual comments authored by anyone working the claim.

(05/24/20 6: pm EDT) Dave Hebert

Adjustment Information

Adjustment Type: Plan Transfer

Adjustment Reason: Transfer from CIGIL to CIGTX

Adjustment Amount: \$12,500.00

Original Plan ID: CIGIL	Plan Name: Cigna of Illinois
New Plan ID: CIGTX (*)	Plan Name: Cigna of Texas

Cancel Back Print Forward Save

FIG. 19B

940

Manual Adjustment - Deposit Transfer - Microsoft Internet Explorer

sign\Screens\adjustment\Manual Adjust_Deptransfer.htm

Current Date: 09/15/2001

Manual Adjustment - Deposit Transfer

Deposit Information

Deposit ID: 1234 Deposit Date: 06/01/2000 Check Date: 05/28/2000

Deposit Type: Lockbox Check Deposit Amount: \$2,300.00

Adjustment Information

Adjustment Type: Deposit Transfer

Adjustment Reason: Non- PARS Check Receipt

Adjustment Amount \$: -2,300.00

Transfer to Account: 00-00-00-00-00 (*)

Transfer Description: Belongs to XYZ mart

Cancel Edit Save

FIG. 19C

960

IPCS - Claims Search Current Date: 10/16/2001

Claim Types: ☒ Third Party ☐ Worker's Compensation ☐ Plan Level Item

RX #

State #

General Pharmacy #

Date of Service through

Patient Name (last/first/initial) (v) (v)

Patient Phone #

Recipient ID

Invoice #

Date of Birth

Plan ID (v)

Date of Injury through

WC Carrier Name (v)

Employer Name (v)

Remitter Name (v)

Deposit ID

Claim Balance (between) and

Claim Status

Claim Status

Group #

NDC

Please select Sort Order

Sort By	Sort Order
	ASC, DESC
Recipient ID	<input type="radio"/> <input checked="" type="radio"/>
- none -	<input type="radio"/> <input checked="" type="radio"/>
- none -	<input type="radio"/> <input checked="" type="radio"/>
- none -	<input type="radio"/> <input checked="" type="radio"/>

962

FIG. 20A

1000

Claim History - Microsoft Internet Explorer								
E:\pro\lives\lives\lives\History_body.html								
Claim History								
Date Changed	User ID	Transaction	Source/Reference	AR Amount	RA Amount	Adjusted Amount	Proposed Amount	
05/16/2000	msmith	deduct					\$10.00	
05/16/2000	proc	payment	32994 - 04/15/2000 32994 - 04/15/2000 43588 - 04/15/2000		\$10.00			
05/15/2000	proc	payment	17691 - 04/15/2000 17696 - 04/15/2000 17697 - 04/15/2000		\$3,004.50			
05/15/2000	proc	Adjustment	Order Adjustment-Price Adjustment			\$0.50		
05/03/2000	jones	rebill	Acfa 1906	\$50.00				
05/03/2000	pc+	reject		\$50.00				
05/03/2000	pc+	admin fee				\$5.00		
05/02/2000	pc+	bill		\$5,000.00				
05/02/2000	pc+	delete		\$5,000.00				
05/02/2000	pc+	bill		\$5,000.00				
Comments:								
(05/23/2000 12:35 pm EDT) Knute Axelson: These are textual comments authored by anyone working the claim.								
(05/24/2000 6:00 pm EDT) Dave Hebert:								
<input type="button" value="Print"/> <input type="button" value="Delete"/> <input type="button" value="Add Comment"/> <input type="button" value="Print"/>								

FIG. 20C

Claim History

Claim Information

Claim Balance: \$0.00 Status: CLEARED
 Rx #: 50195 DOS: 03/19/2002 Patient Name: MARTIN, DIANNA
 St re #: 6168 G.P. #: 3670216 Recipient ID: 29958877803
 Inv. #: Plan ID: AETNA Remitter Name: AETNA US HEALTHCARE

Payment History

Deposit Date	Deposit ID	RA Category	Exception Reason	RA Amount
03/19/2002	8918738	PAYMENT	00	(\$81.62)
03/19/2002	8918738	NEGATIVE	00	\$81.62
03/19/2002	8918738	PAYMENT	00	(\$81.62)

Date Created	User ID	Transaction	Fili # Dispan	Fili #	Source/Reference	AR Amount	RA Amount	Adjusted Amount	Payback Amount
06/22/2002	PARS	PAYMENT			8918738 - 03/19/2002		(\$81.62)		
06/22/2002	PARS	NEGATIVE			8918738 - 03/19/2002		\$81.62		
06/22/2002	PARS	PAYMENT			8918738 - 03/19/2002		(\$81.62)		
06/21/2002	PARS	FILL	1	2	ICPLUS - DL ACCEPTED	\$81.62			
06/21/2002	PARS	DELETE	1	1	ICPLUS - DLD ACCEPTED	(\$81.62)			
06/21/2002	PARS	FILL	1	1	ICPLUS - DL ACCEPTED	\$81.62			

Comments:

FIG. 20D

1040

FIG. 20 E

THE **NEW**